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THE Physician and Pharmacist.

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PROSPECTUS

OF THE

PHYSICIAN AND PHARMACEUTIST.

THE PHYSICIAN AND PHARMACEUTIST will appear every three months, commencing with the August number, and will contain 20 to 24 closely printed quarto pages, at the price of 50 cents a year. The contents of each number will be a brief compendium of *medical, chemical and pharmaceutical* literature for the three preceding months, and will be culled by practical physicians and chemists from Foreign and American publications, and will contain original articles from the best sources in this country. We shall devote a portion of our space to questions and

answers on all subjects relating to medicine, chemistry and pharmacy, and the publication of valuable formulas. All lengthy, verbose and abstract subjects will be excluded from our columns, our purpose being to furnish physicians and druggists with leading practical ideas—and we feel certain, from the facilities at our command, that they will find, from a perusal of the columns of this journal, many new and valuable as well as profitable facts, which can be obtained from no other publication in as concise and applicable form as we present them.

The success of THE PHYSICIAN AND PHARMACEUTIST, as shown thus far, is without precedent. We originally issued a prospectus or specimen sheet, which has been used for several months by our agents in taking subscriptions, and we are, therefore, willing, upon the issue of the first number, to compare our list of actual subscribers with any similar publication in this country, and shall not cease our exertions until it reaches a subscription list of 50,000.

We shall advertise nothing that will not interest the physician or pharmacist, and shall endeavor to exclude all parties that are not entirely reliable.

Respectfully,

REED, CARNRICK & ANDRUS,
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ORIGINAL ARTICLES.

The Advantages accruing from Sub-cutaneous Injections.

BY A. M. CARPENTER, M. D.,

Professor of Institutes and Practice of Medicine, Iowa University.

Four demonstrative cases came under my notice within the past five days, in brief as follows:

Case 1st.—*Lumbago*.—Mrs. W. C. was attacked with severe pain in the lumbo sacral region, of a "grinding and cutting character." Found pulse feeble, skin cool and clammy; some nausea. Indisposed to change her position, for fear of awakening the sharp pains which recurred every five minutes. Exhibited one third grain of sulph. morph. every fifteen minutes. At the expiration of half an hour she was screaming with pain, and implored my aid for her relief. I accordingly threw beneath the skin one fourth grain of morphia, and before I had dried the needle of the syringe she exclaimed, "Thank Heaven, I'm easy."

Case 2d.—*Bilious Colic*.—Geo. F. was attacked severely with pain in the region of the umbilicus. Tongue coated heavily, conjunctival lining highly tinged, skin cold and moist; pulseless, pain of a twisting nature, occurring in paroxysms, and augmented in severity at each renewal. Patient said he would surely die. Morphia was given in one third grain doses every ten minutes, conjoined with the energetic application of hot fomentations. No relief being afforded by a grain of morphia by the mouth, I determined upon the little syringe, and into the groin inserted a quarter grain of the salt, which had the effect to deaden the sensibilities in less than five minutes, disrupted the paroxysms, and afforded positive relief.

Case 3d.—*Sporadic Cholera*.—Mrs. K. Summoned to patient hurriedly, whom I found suffering from excessive vomiting, severe cramps in stomach and muscles of lower extremities, with profuse choleraic discharges from the

bowels; pulse feeble; skin cool, and perspiring freely. Injected one fourth grain of morphia into the arm, and, with the persistent employment of heat to all the surfaces, all the urgent and distressing symptoms were perfectly subdued in the space of thirty minutes, and patient left entirely comfortable.

Case 4th.—*Nephralgia*.—Mr. D. was attacked with sharp pains in region of left kidney, and extending along the ureter, corresponding down to the end of the virile organ; testicles retracted; constant desire to micturate. At once inserted the syringe, holding in solution one third grain of morphia, into the integument above the spinous process of the ilium. The operation not being followed by relief in fifteen minutes, an additional quarter grain of the salt was thrown in. At the insertion of the deltoid the acuteness of the pain was dissipated at once, and I had the happiness to witness the complete emancipation of the fourth case from almost unbearable torture, by the simple but most expeditious method, as above described.

Whatever may be said by those who are reluctant in adopting this means of subduing pain, it must be conceded by experienced observers that we seldom get such prompt effects when the mouth is adopted as the channel by which to reach the sensibilities. Moreover, it is claimed for this method that the stomach is not so liable to become irritated and intolerant as when the salt is exhibited per ore; that absorption takes place more speedily; that the relief from pain is more enduring; that the pain afforded by the introduction of the needle is ephemeral; that the promptest and simplest mode of assuaging suffering is the most scientific, and best appreciated by the poor patient, whose kindly remembrance is oft times more remunerative than the offer of gold.

PEPSIN.

Not unfrequently the physician is hindered in the exhibition of tonics and animal food by the inability of the stomach to retain and digest them; and as this is quite a common occurrence, during the course of lingering illness, and convalescence from many acute diseases, it becomes of more than usual interest to the practitioner as to what article, or combination of the *materia medica*, would be best adapted to so important an end as the correction or alleviation of a train of symptoms distressing to the patient, and often annoying to the medical attendant.

The composition of the gastric juice has become so well known that, in very many cases, we are enabled to substitute important constituents when nature refuses or withholds her supply.

Probably there has been no more important era in the treatment of diseases of the stomach, whether dependent upon local or constitutional lesions, than the presentation of artificial Pepsin. Its first introduction was, in consequence of the imperfect manner in which it was prepared, received by the profession with many doubts and complaints as to its efficacy and reliability, and it was not till quite recently that it was so perfected as to call forth the unqualified approval of undoubted medical authority. The process now generally approved is the subjection of the rennet to washing with water, and scraping off the

mucous membrane; the latter is then reduced to pulp, macerated in pure water from fifteen to twenty-four hours, and filtered. A sufficiency of acetate of lead is added, a precipitate formed which is collected, and a current of sulphuretted hydrogen passed through it. Then it is again filtered and evaporated at a low temperature, and the dry residue powdered, which gives pure Pepsin.

When Pepsin first attracted the attention of the profession it was generally exhibited in the form of powder. Now, however, its use is approved in certain combinations, or a menstruum containing advantageous properties. As in Pyrosis, a combination with a soluble salt of bismuth has a most happy effect—or, when the peristaltic movement is sluggish, the addition of strychnia: in cases of anemia, its combination with a preparation of iron and bark.

It is a common occurrence for the patient to bear ferruginous tonics and cod liver oil, if administered with Pepsin, who cannot do so without.

One of the most desirable forms of exhibiting Pepsin is the wine. It is prepared by subjecting the rennet to the action of a good article of sherry. This form will be found most serviceable in the sickness of pregnancy.

To Dr. L. Corvisart, of Paris, belongs the honor of bringing Pepsin into general use. His claims are set forth at length in the *London Lancet* for October, 1858.

DR. F. W. M.

Syrup Phosphate of Iron, Quinia and Strychnia.

Many complaints have been made by pharmacutists that the Syrup Phosphate of Iron, Quinia and Strychnia, prepared in accordance with the published formula of Dr. Aitkens, was not satisfactory. No matter how careful the manipulation, the Syrup would be dark colored and become turbid in a short time, and finally a gelatinous precipitate would be thrown down in large quantities and render the product worthless.

In the manufacture of this preparation in large quantities, I have deviated to some extent from the Doctor's process, and have always succeeded in producing a perfectly clear, light-colored syrup, that keeps well.

His process consists (after precipitating the phosphate of iron, and freeing the quinine from sulphuric acid,) in dissolving these precipitates along with the strychnia in dilute phosphoric acid, after which add the sugar and dissolve without heat.

In my process, I use a much larger amount of water in precipitating the phosphate of iron than is directed in the original formula; and after separating the alkaloid, I dissolve them in monobasic phosphoric acid, instead of the dilute acid, and without the addition of any more water. Then dissolve these by a gentle heat, after which add the strychnia, then filter and set aside.

A syrup is then made *by heat*, using the amount of water requisite to make, with the solution, the quantity desired. During ebullition skim the refuse matter, after which strain and let cool to about 100 or 115 deg., then add the solution and filter.

J. A. M.

Iron by Hydrogen.

Perhaps one of the most remarkable instances, in the whole list of pharmaceutical fabrications, of total dissimilarity from the official preparation, combined with perfect inertness, may be found in this preparation as usually thrown into market, even by houses generally considered, like Cæsar's wife, above suspicion.

Of its great therapeutic value, when skillfully made, there can be no doubt; attested as it is by such authorities as Quevenne, Miquelard, Soubeiran, Dublanc, Costes of Bordeaux (who experimented with it for over four years in the hospital of Saint André), Pereira, and all who have ever written about it, who fully agree in pronouncing it to be the preparation which introduces the

greatest amount of iron into the gastric juice; and as in practice each preparation of this metal seems in turn to be superior to all others, or to be just the particular one, which meets some one or other of the constantly changing peculiarities and idiosyncrasies of different patients, so no one of such preparations can possibly be spared from the list, more especially when of such well ascertained value and importance as this.

When properly prepared, and carefully kept, it is a light, soft powder, of a steel-gray color, ignites easily, fire, when applied to a small point spreading through the whole mass, leaving it completely blackened by the oxidation thereby occasioned; it is easily soluble in dilute sulphuric acid, giving off its hydrogen so rapidly as to resemble in its lively effervescence the action of the carbonates when treated in the same way. The articles of foreign (mostly German) manufacture, which have usually been sold as "Iron by Hydrogen," for the most part, were never attempted to be brought into contact with that gas, but are simply metallic iron, finely comminuted by mechanical means, heavy, effervescing slowly with acids, with a grittiness of grain and metallic lustre, easily distinguishable by anybody who had ever handled the true; and this delectable article has been foisted on druggists and physicians to such an extent, that probably not one dispenser in every twenty in the land ever set eyes on a properly prepared sample. The reason for so gross a substitution becomes obvious when we find the German Iron by Hydrogen (so called) selling in the New York market to-day for forty-five to fifty cents per pound, while the true costs upward of three dollars.

Other samples are black, and the English and Scotch are said to have been made from magnetic oxide of iron, by simply reducing it to powder; no doubt much of it found its way here.

Still another foreign variety, somewhat better than the preceding, generally sold as high as the true, of a black color, indicating very imperfect deoxidation, and consequent inferiority in strength and insolubility in the system, is sold (innocently perhaps) by some of our best manufacturers and others as French, and is, of course, inert, just in proportion to such insolubility, and its blackness proves it either to have been badly made or carelessly kept, or both.

It should be kept in small, tightly corked bottles, and quite dry, as it rapidly absorbs oxygen and moisture.

J. H. K.

The Advance of Medical Science.

Like all other branches of science, in this age of intelligence and progress, the practice of medicine, surgery, and pharmacy has made rapid strides towards the more perfect understanding of the subject, the adopting of means and methods better adapted to bringing to pass the end desired, and the laying aside of those which have been rendered useless by the light of intelligence and research.

"The heavens and the earth, and the waters under the earth," are now read as open books, and should Greece's wisest sons, or even those of our own country, who are but a century's remove from us, visit this sphere to-day, they would involuntarily exclaim, "Surely this is not the world which we left." So, any of the physicians and surgeons of the last century, and even of the first half of the present one, would be almost as much at sea in practice as if they were but taking their first lessons.

This is owing, somewhat, to the change which has been taking place in the character of diseases, but mainly to the new and improved methods of practice, and the means and agents which the researches of science have brought to light and placed at our disposal. And surely any physician, surgeon, or pharmacist has proved recreant to the trust reposed in him, by a com-

munity who are daily placing the lives of themselves and families in his keeping, if he does not thoroughly search and examine all things which an improved science has made available.

There are men who have so far forgotten their duty to mankind that they have wrapped themselves up in the intelligence and ability which their necessary course of study has given them, as with a garment, and persistently refused to believe that their practice could be improved upon, or that anything could be brought to their notice which they did not already know, and who were rather inclined to look with suspicion upon every improvement which they did not fully understand.

A young student remarked, the evening upon which he had graduated, "that his diploma simply showed that he had learned how to think and study." This, I thought, was almost positive proof that he would make an ornament to the profession, for there is everything to be learned from practice, and the practice and experience of others.

A physician should not only search out the best agents, but much attention should be paid to the best forms of administering them, and not leave his prescribing to be an empty farce, and result in the dosing of lifeless articles of wood and stone instead of his patients, leaving him to look in vain for results, where, had his patient taken his remedies, he could have counted with certainty upon relief and positive cures.

G. W. Y.

Practical Use of Carbolic Acid as a Disinfectant.

During the past week the New York City Board of Health has caused over eighty miles of streets to be sprinkled with a mixture of a solution of carbolic acid and sulphate of iron, using one thousand gallons of the former and seven tons of the latter. The effect was to decrease the mortality of the city about eight per cent.

A List of Medical and Chemical Publications in the United States.

American Journal of Medical Sciences, Philadelphia.
Medical and Surgical Journal, Boston, Mass.
Medical and Surgical Reporter, Philadelphia.
The American Journal of Insanity, Utica, N. Y.
Medical News and Library, Philadelphia.
The Cincinnati Lancet and Observer.
The Pacific Medical and Surgical Journal, San Francisco, Cal.
Buffalo Medical and Surgical Journal.
Chicago Medical Journal.
Chicago Medical Examiner.
St. Louis Medical and Surgical Journal.
Richmond and Louisville Med. Journal, Louisville, Ky.
New York Medical Journal.
The Journal of Materia Medica, New Lebanon, N. Y.
Medical Reporter, St. Louis, Mo.
The Medical Record, New York.
The Journal of Applied Chemistry, New York.
Atlanta Medical and Surgical Journal.
The Detroit Review of Medicine and Pharmacy.
The Nashville Journal of Medicine and Surgery.
The Medical Gazette, New York.
The Western Journal of Medicine, Indianapolis, Ind.
The New Orleans Journal of Medicine.
The Boston Journal of Chemistry.
The Cincinnati Medical Repository.
Iowa Medical Journal, Keokuk, Iowa.
The Humboldt Medical Archives.
Galveston Medical Journal.
The Chemical News (Reprint), New York.
Rankin's Abstract, Philadelphia.
The Druggist's Circular, New York.
London Lancet (Reprint), New York.
The Medical Gazette, New York.

SELECTED ARTICLES.

Prescriptions.

With the separation of prescribing from the dispensing of medicines, the necessity arose for some means of conveying the instructions of the physicians to those by whom they were to be carried into effect. It was necessary to have a medium of communication for indicating the remedies to be administered in the treatment of disease. This medium of communication—the prescription—not only symbolizes the existence of pharmacy as an occupation distinct and separate from the practice of medicine, but at the same time it represents an advanced state of medical practice, in which all the energies of the practitioner are devoted to the higher departments of his profession, while the preparation of the prescribed remedies is left to those who make it their special business. The prescription, moreover, is a record of the treatment adopted, which, if necessary, might be appealed to for the satisfaction of the patient or the justification of the physician.

It is essential that the instructions given in the prescription should be brief, yet explicit—that the terms used should be as little liable as possible to misconception, and that the preparation of the medicines ordered should not cause inconvenient delay in administering them. In providing for the accomplishment of these objects, the Pharmacopœia is designed to supply such information as will render the terms used in prescriptions intelligible. To a great extent this has been accomplished, and most prescriptions are written in such a way as to admit of easy interpretation by reference to the Pharmacopœia.

If all prescriptions were written with reference to one recognized standard of interpretation, the medicines ordered, and the method of ordering them being such, and such only as the legally authorized Pharmacopœia describes, the duties of dispensers would be comparatively easy. But it is obvious that it would neither be possible nor desirable, in the existing state of medical knowledge, thus to limit the discretionary power of the physician in selecting the remedies to be applied in the treatment of disease. The curative art being essentially one of progressive development, of which, without disparagement, it may be said that more remains to be achieved than has yet been effected in establishing a sound and satisfactory system of treatment, the field for investigation must be left open, and means afforded for the trial of new remedies, as well as for testing the efficacy of those hitherto principally employed. It is here that the difficulties, both of prescribers and dispensers, become most apparent. The physician naturally appeals to the pharmacist for assistance in devising new methods of combining or preparing remedies to be submitted to trial—and these, of course, in the first instance, may be unknown, excepting to those by whom they have been introduced. The prescription cannot always indicate the precise nature of the remedies ordered, without referring to some authority for detailed descriptions, which could not be conveniently included in so brief a document as it necessarily is. If the reference be to some Pharmacopœia other than that which is legally recognized, or to some remedy of which an account has already been published, this should be clearly indicated in the prescription. But the remedy may be one of which no published account exists. Is the physician to be precluded from ordering such? It may be a remedy with reference to which even those who are using it are not yet satisfied that they have perfected the method of producing it, and this would be sufficient ground for objecting to its publication. But there are other obvious motives, which are likely to come into operation in such cases. The chemist who has assisted in suggesting or preparing the remedy, and who may have spent much time, and have otherwise incurred expense in experi-

menting on the subject, not unnaturally looks for some benefit in return, and therefore expects to be allowed exclusively to supply the remedy to others. There is nothing very unreasonable in this, but the question arises as to the best method of satisfying just claims of this description without injury to others, and without prejudice to the interests of the profession, which may be implicated in such cases.

If the remedy be a new and unknown one, the name by which it is prescribed, and by which alone it can be designated in a prescription, may fail, as it probably would, to indicate its exact composition, or to supply sufficient information to enable those not otherwise instructed to prepare it. The true method of preparing it is known only to the chemist by whom the process was worked out experimentally. It may be a liquor, or a syrup, or a tincture, containing some very active ingredients—strychnia or morphia, hydrocyanic acid or arsenic—but the name gives no indication of the strength of the preparation; and if it be prescribed without further reference, much annoyance, if not serious injury, may result. A chemist has a prescription brought to him by a regular customer, in which a medicine such as we have alluded to is ordered. Is he to make up something that will answer to the name and not be inconsistent with the dose ordered? or shall he tell the patient that he has not the required information to enable him to prepare the medicine? or shall he refer to the physician for further information? The last named course, which would be usually adopted when practicable, may, in some instances, be impracticable, in which case the chemist may suffer in reputation, or lose his customer, or be tempted to prepare the medicine without sufficiently precise knowledge of the method of doing so. It is much to be desired that some more systematic and unobjectionable method than is now frequently pursued should be agreed upon and generally adopted in cases such as these. The prescription should, in every instance, give sufficient information, directly or by reference, to enable any qualified pharmacist to dispense it. If the names used be such as occur in the legally authorized Pharmacopœia, they should, of course, be interpreted according to that authority; if they are intended to refer to any other published authority, this should be clearly indicated in the prescription; and lastly, if a medicine is ordered of which there is no published account, and only one authorized maker, the name of the maker should be appended, so that the medicine might be obtained from him when required for dispensing. By some such arrangement as this, the interests of all the parties concerned would be protected more completely than they are at present, and dispensing chemists would be spared the annoyance frequently experienced from the use of terms in prescriptions, the full signification of which is intelligible only to a favored few.—*London Pharmaceutical Journal*.

Griffith on the Inhalation of Chloroform in Cholera.

This is an application of chloroform which requires, as all powerful remedies do, prudence and a judicious selection of the moment for its administration. It is as early as possible during the invasion that the author prefers to commence with the inhalations, or, at latest, as soon as depression of the forces begins to be manifested, and the period of collapse to be impending; but he does not hesitate to have recourse to it even when this period is fully established. Thus, in cases where the grave symptoms are not developed gradually, but appear suddenly with great intensity, he administers chloroform without delay, as certain to procure the patient immediate relief.

In those cases where Mr. Griffith has adopted this mode of treatment, if there were cramps they were quickly allayed; if there was emesis, it was sometimes

quieted, and sometimes altogether arrested; if there were colic and griping diarrhoea, these were materially modified, whilst, in the meantime, the functions of the heart were improved, as evinced by the sounds becoming more audible in the precordial regions, by the pulsations becoming more energetic, by the return of the radial pulse, and by a disappearance of the lividity of the face and extremities.—*Med. Press and Circular*.—*Bouchardat's Annual Abstract for 1867*.

Death from Carbolic Acid.

EDITOR CHEMICAL NEWS.

SIR—Allow me to add my opinion to Messrs. F. C. Calvert & Co's, that the jury's verdict on the cause of Mr. Berger's death is an error, and that the gentleman must have died drinking carbolic acid, and not from inhaling it. The only complaint that my assistants make, from constantly inhaling carbolic acid, is that of increased hunger. I have been continually experimenting with carbolic acid for more than a year, and practising its inhalation upon myself, sometimes to intense inconvenience, and I can scarcely think it possible to cause death in that way.

It may be painful to the friends of this excellent gentleman to be told that he must have drank carbolic acid; yet the accuracy of this fact is important to the last degree, lest an insane prejudice should be created against the use of carbolic acid, just as its marvelous effects in consumption, skin disease, &c., are beginning to be known. Neither new nor old remedial agents should be used indiscriminately. Excess can never be made the rule of life, and they who try excess must suffer.

I am, &c.,

Chem. News.

T. A. READWIN.

Curious Experiment.

In this month's *Revue Populaire*, of Paris, Dr. Bader gives the following curious experiment, made by Dr. Claude Bernard: If oxygenized blood be injected into the arteries of the neck, immediately after decapitation, warmth and sensibility return; the eye gets animated, and displays such strong perception that a hammer shaken before it will cause it to wink and look sideways.

Therapeutic use of the Warm Blood of the Chicken, Turkey and Duck.

The blood of the chicken, turkey and duck has been used by M. Marcarel with success, in grave cases of anæmia. The blood is received in a cup, heated on a sand-bath, and given internally; the patient may take a tablespoonful of kirschwasser or rum afterwards.—*Bull. Therap., July*.

I have often employed calf's blood for the anæmia of glucosuria, giving it at the moment it leaves the vessel; the blood of the chicken, likewise warm, may be cooked with broth, after coagulation, and seasoned with salt and spices.—*Bouchardat's Annual Abstract for 1867*.

Indelible Marking Ink prepared from Aniline.

An indelible marking ink is prepared from aniline by mixing the two following solutions: a, cupreous solution—8.52 grm. of crystallized chloride of copper, 10.65 grm. chlorate of soda, and 5.35 grm. of chloride of ammonium are dissolved in 60 grm. of distilled water; b, aniline solution—20 grm. of hydrochlorate of aniline are dissolved in 30 grm. of distilled water, and 20 grm. of a solution of gum arabic (1 of gum to 2 of water) with 10 grm. of glycerine are added. By mixing in the cold four parts of the aniline solution with one part of the cupreous solution, a green liquid is obtained, which can be used immediately for tracing characters upon linen; the marks, however, alter after a lapse of a few days. It is necessary to keep the solutions separate, until required for use. If the fluid does not flow easily from the pen, it may

be diluted without fear of diminishing the intensity of the tint, which, at first green, gradually darkens and becomes black. Heat causes the change to take place instantaneously; a steam heat is sufficient, and is better for the fabric than a hot iron. Afterwards the linen is washed in warm soap and water. This ink resists acids and alkalies, and is remarkably permanent.

Carbolic Acid.

Extracts from the Journal of Medical Sciences, on Carbolic Acid as a Remedial Agent, by W. KEMPSTER, M. D., Utica, N. Y.

The first application of this agent, under my own observation, occurred in a case of catarrh, where the discharge was profuse, offensive, and consequently very annoying to the patient. Various remedies had been previously tried without success. Hoping to derive advantage from its properties as a disinfectant, it was administered to the patient by inhalation, using one grain to an ounce of water, and the liquid conveyed to the afflicted parts by means of a steam spray-producer. The effect surpassed my most sanguine expectations. It not only relieved the fetor, but in the course of two or three inhalations, changed the character of the discharge, and the patient recovered rapidly.

It is used at the present time in the treatment of exzema, nasal polypi, and diseases of the nasal passages, in which there is an offensive discharge. Even if it exerted no curative action, its power to correct fetor would be a great recommendation; but this is not all, it stimulates the ulcerated surface to a healthy action, promotes normal granulation, and thus assists in the curative process. This remedy is also employed by some of the physicians who are engaged in the special treatment of throat and lung diseases, particularly French practitioners, who direct that it should be inhaled in combination with other appropriate remedies. They speak highly of its efficacy in cases of ulcerated sore throat, chronic bronchitis, and that morbid condition of the mucous surfaces of the air passages which give rise to a constant expectoration of a muco-purulent material. If a solution of one grain of the acid to an ounce of water does not seem to meet the indication, the quantity may be increased to five grains, or even more; but it is better to begin with a mild solution, gradually increasing the strength until the desired effect is obtained.

My next use of the acid was in a case of scarlatina, where the breath was particularly obnoxious, owing to an ulcerated condition of the throat. A gargle of two grains of the acid to an ounce of water relieved the fetor at once, and apparently proved beneficial. No other gargle or application to the throat was used.

It would seem to be appropriate in cases of diphtheria, a strong solution of the acid being used for a local medicament; its power to correct the foul breath would be an indication for its use, and its astringent and stimulating properties might prove beneficial. In cases of common sore throat (simple tonsillitis) it is found to answer admirably, with the advantage over the ordinary potassa gargles of relieving the "bad taste" and foul breath almost immediately.

In the State Lunatic Asylum, at Utica, it is successfully used to relieve cases of sluggishness of the bowels, accompanied by offensive breath. The dose is a drachm of a solution of one grain to the ounce (which is the house standard). A striking exemplification of the efficacy of this remedy occurred in the case of a melancholic patient admitted to this Asylum. He had for a number of years suffered from attacks of dyspepsia, accompanied with acid eructations and the formation of gas. Latterly these symptoms became continuous. He complained of intense heat and pain in the stomach; stated that the eructation of fetid gas had become unbearable, and the same smell emanated from the cutaneous surface, so that it was

offensive to every one in the room. He was at once put into a warm bath, then thoroughly washed with a solution of the acid (grs. v. to the ounce). Internally, two drachms of the standard solution were given him three times daily for two days. At the end of this time the breath was sweet, and no unpleasant exhalation from the skin was perceptible. He was also relieved from the painful distension produced by the formation of gas in the stomach and bowels. Whenever he feels the approach of this difficulty, two or three doses of the house preparation relieve him at once from the unpleasant and painful complication.

Yeasty stomach, sometimes consequent upon a meal of rich food, which produces flatulence and expulsion of gas, with a tendency to regurgitation, is usually relieved by a drachm or two of the solution above mentioned; this checks the fermentative process. The power it possesses to arrest fermentation would be an indication for its employment in saroina, but the opportunity has not been offered me to test this. Diarrhoea, produced by eating unripe fruit or other articles which promote fermentation, is speedily relieved by combining a drachm or two of the solution with the usual remedies. As a dentrifrice, commingled with myrrh or some aromatic, it removes the disagreeable and offensive odor arising from carious teeth.

As a remedial agent, in certain forms of skin disease, it seems to possess decided advantages. A patient applied for something to relieve a disordered condition of the scalp which had existed for some time. It proved to be a well-marked case of Tinea Capitis in an advanced stage. The crusts had cracked open with a straight smooth fracture, presenting a shining floor, looking as though the scalp had opened and exposed the cranial bones. There were several of these cracks, measuring from a half an inch to two inches in length, the principal ones occupying a position over the region of the anterior fontanelle, and extending several inches in each direction. Other crusts had formed over the temporal and occipital regions. In order that the acid might be used effectually the hair was cut short, and the entire scalp washed with a solution of the acid (two grains to the ounce) four times daily. The subsidence of the disease was marked; those crusts in process of formation were checked, and the dry grayish crusts already formed, with those cracked open, were speedily removed. After the wash had been continued for one week a glycerolate of carbolic acid* (strength, five grains to the ounce) was applied, which possessed the advantage of being a more permanent preparation. The treatment was commenced January 7th—and at the date of writing (Jan. 28th) the disease has disappeared. No other treatment, either internal or local, was employed. One other case has been mentioned to me, which was even more severe than this, and in which various modes of treatment had been employed without arresting its progress. The treatment mentioned above was resorted to with an immediate abatement of symptoms and rapid recovery. We have used the glycerolate mentioned in cases of Herpes Circinatus with entire satisfaction in every instance.

As an escharotic its action is prompt but superficial. It has a tendency to spread; this can be easily stopped by the application of water. The effects produced upon ulcerated surfaces are not transient; it seems to exert its power as an alterative for some time after the peculiar odor has disappeared.

As an injection for gonorrhoea it has proved itself equal, or I may say superior to the ordinary remedies, and is less painful, the solution used being two to five grains to the ounce. The crystallized acid would seem to be indicated in the treatment of syphilitic ulcers, but upon this I cannot speak from observation.

* The odor of the acid can be overcome by the addition of a few drops of Oil of Lemon.

Hæmaturia Stopped by Boluses of Copaiba and Cubebs.

In the *Union Médicale de la Gironde* a case has been mentioned by M. Méran, in which the hæmaturia was very abundant. Baths, cooling drinks, opium and camphor were useless; and, although the gonorrhoeal discharge ceased, the author gave the above named boluses, as between three to five ounces of blood were evacuated at each act of micturition. These had the desired effect. Another case of the same kind has been benefited by cubebs alone. It may be asked whether the hæmaturia was not on the decline, and would have disappeared without the cubebs? Nor should it be forgotten that perchloride of iron internally, gallic acid and cold injections, have triumphed pretty often over discharges of blood from the urethra.

STERILITY IN THE MALE CURED BY AN OPERATION FOR PHIMOSIS.—M. A. Amussat, Jr., remarks that it can readily be understood that extreme phimosis may constitute a mechanical obstacle to the regular propulsion of the sperm, and thus be a cause of sterility in the male; and he records a case of sterility cured by removing phimosis. The subject of it was a gentleman who had been married for five years without his wife becoming pregnant, which caused uneasiness in the family. On examination his physician ascertained that he had a very contracted phimosis, with excessive length of prepuce, so that the gland could not be uncovered, and when he urinated the præputial sac became filled like a funnel, from which the urine afterwards flowed in a very thin stream. M. A. removed the prepuce by circular cauterization on the 11th of May. The part separated on the 25th, and in July the cicatrization was complete, and the remaining prepuce could be drawn back so as to uncover the gland, and urination became free. One year afterwards the gentleman's wife gave birth to a son.—*Journal de Méd. et Chir. Prat.—Journal Med. Sciences.*

Lancing the Gums in Childhood.

BY F. H. THOMSON, M. D.

From time immemorial it has been the habit, among practitioners of every class, to assist the irruption, as is supposed, of teeth in children, by cutting down upon these organs. Of late years, however, a much more reasonable and rational practice has been followed. By cutting down upon the tooth you simply relieve, to a small extent, the tightened integuments, from which all circulation has been expelled. The cut, of course, heals up immediately, leaving a hard eschar, which complicates the symptoms, and makes it more difficult for the tooth to make its way through.

The irritation arising in children during teething does not so much take place from the above pressure as from the engorgement of the vessels supplying their circulation, and which are in a great state of activity at these times. A sure mode of relief is to open these vessels, which will be found in all such cases much engorged. They should be cut low down, at the reflected junction, between the lip and the gum; instantaneous relief follows, even in the case of convulsion fits.—*Glasgow Medical Journal.*

Persulphuret of Hydrogen.

A paper has been received from M. A. W. Hoffmann on the persulphuret of hydrogen, which, he maintains, does not consist of one equivalent of hydrogen and two of sulphur, but of two of the former and three of the latter. This he proves by an analysis, the only interesting feature of which is that he obtains a crystallized body, completely insoluble in water, ether, alcohol, or any other known solvent capable of redepositing it in crystals. This singular compound he obtains by mixing a saturated solution of strychnine with another of hydrosulphate of ammonia, containing an excess of sulphur.

Use of Mercurial Collodion for Syphilitic Maculae.

Dr. Leclerc observed numerous maculae remaining in the case of a young woman who had been successfully treated for syphilitic papules. These red spots, which could, with difficulty, be made to fade upon pressure, were, for the most part, situated upon the face, chin and neck. Alkaline baths, corrosive sublimate baths, and sea baths made no impression upon them, and the patient was in a state of despair.

Dr. Leclerc then tried brushing them over with the following solution—

B. Bichloride of mercury.....10 grains
Collodion.....5 drachms
Mix and dissolve.

In five days the spots were scarcely apparent, and three applications of the solution made them disappear entirely. Its use had no other undesirable effects than to produce a slight pruritus, which was, however, very bearable.—(*Presse Med. Belge*).—*Bouchardat's Annual Abstract*.

Vaccination a Prophylactic against Cholera.

Dr. H. Otto, of Buckau, near Magdeburg, recommends vaccination with the virus of cow's pox as the surest prophylactic against cholera. The town of 8,000 inhabitants was visited by the small pox from December, 1865, to July, 1866, and by the cholera from August 25 to October 10, 1866, with 550 cases and 160 deaths from the latter. Children, up to three years of age, once vaccinated, remained free from cholera; not a single case of cholera occurred amongst those vaccinated the same year, or who had been attacked by variola or varioloids. The fact is certainly remarkable, that amongst 500 persons re-vaccinated by Otto, not a single case of cholera occurred. "Vaccination with quassia, as a prophylactic against cholera, has not given the expected result."—*Pharm. Central H.*, 1867.

Ozone.

Dr. H. Day, in a report on this article, made to the St. Andrew's Medical Graduates' Association, gives the conclusions at which he has arrived, the most important of which we subjoin:

"There can be no escaping, at this moment, from the theory that ozone is a modified condition of oxygen, indeed, is oxygen plus force, which force is probably used in condensation—in other words, the power or capability of oxygen to combine with itself.

For the production of ozone in the laboratory no method is so good as that accomplished by the aid of an induction coil. The production of ozone in the air, if it be there, is not yet in any way definitely understood.

The ordinary tests for ozone are imperfect, not because they will not prove the presence of ozone, but because they prove too much—that is to say, the presence of other bodies also common to the atmosphere.

In its action on the body the effects of ozone seem to be confined to the respiratory passages and structures—in fact, it is purely local in its action, resembling closely diluted chlorine and diluted bromine in vapor, the phenomena induced, varying in intensity, may be catarrhal, bronchial or pneumonic—nor is there any evidence of any other class of diseases of ozone.

On dead matter ozone exerts a powerfully destructive action, resembling in this way chlorine, iodine, and especially bromine.

Ozone is a disinfectant and deodorizer, belonging to those bodies which disinfect and deodorize by resolving and decomposing into primitive and innocuous forms, competing in this respect with substances already named, *i. e.*, chlorine, bromine and iodine. It possesses these qualities in a less degree than chlorine and bromine, and in many respects, not so applicable as iodine.

As a preventive of disease ozone can only act by destroying organic animal poisons, in which respect it may

be compared with the substances I have more than once named. With regard to the disinfecting and deodorizing powers of ozone, I would refer you to the opinions of the late Dr. Barker, contained in the Hastings Prize Essay for 1865. The subject of comparison, and indeed the whole subject of deodorizing and disinfecting, is there so admirably, so exhaustively discussed as to leave, it seems to me, nothing further to be said on the subject.

Lastly, as a remedy. In the form of ozonized oil, of ozonized ether and ozonized water, it once more ranks with a similar combination of remedies, containing chlorine, bromine, and especially iodine. Whether, in any respect, it may prove to have greater advantages than the last named trusty and ready agent, can only be conclusively arrived at by determining whether it will do what iodine will not do, and this can only be decisively made out by applying to it the test of inductive philosophy—a rigid exclusion of all that is ineffective."—*Med. Press and Circular*.—*Journal Med. Sciences*.

A Remarkable Surgical Operation.

A few months ago a man named Abram Raught, living in the town of Livingston, in this county, met with a terrible accident, the particulars of which have before been published, but in order to refresh the minds of our readers so as to preserve the connection between the case and its final development, it is necessary for us to state in brief the outline of the sad accident. On Monday, April 27, Mr. Raught, while at work pressing hay, was hit in the face by the "leader" of the press, caused by the breaking of a sweep. The leader hit him with terrible force just below the eyes, entirely crushing the nasal bones, knocking loose the floor of the eyes and fracturing the two cheek bones. The upper jaw was also broken loose, so that the whole of the bones of the face below the eyes, with the soft part attached, fell down from the head, presenting a horrible and ghastly spectacle. The hopes of recovery for the injured man at the time were alim indeed, but he being the possessor of a strong constitution, Dr. Wm. H. Pitcher, of this city, who was called to attend him, was inclined to the belief that the life of his patient might be saved. The great trouble was how to keep the flesh in its proper position, as the whole face, so to speak, dropped down. An idea entered the doctor's mind, which was quickly seized and put into practical use, as follows: He secured the services of Dr. Sheldon, dentist, of this city, and gave him instructions to take an impression of the injured man's upper jaw and make a temporary set of teeth for his use, with ends projecting each side, in which holes were to be made, the whole resembling a horseshoe, with ends turned up. This was done in an artistic manner by Dr. Sheldon, and the teeth placed in Mr. Raught's mouth. Dr. Pitcher then had made a leather cap, which fitted close to the forehead of his patient, around the edge of which were small pegs. Wires were then attached to the ends of the teeth plate in the corners of the injured man's mouth (which projected outward) and fastened to the pegs, and in this way the flesh was held in its position. Dr. Pitcher would occasionally call at the residence of his patient and give the wires a trifle more tension, and in three weeks time the flesh had healed, the bones united, and the patient allowed to eat moderately. The breaking of all the nasal bones, and their total and final disappearance, left a cavity in the upper portion of the nose, which still remains, but it is the intention of Dr. Pitcher next fall to perform a plastic operation on his patient to remedy this defect; in other words, to transplant a sufficient quantity of flesh from the forehead to fill the cavity, and he has no doubt of the success of the operation.—*Hudson Sta*

The American Pharmaceutical Association holds its sixteenth annual meeting in the city of Philadelphia on the 8th of September, 1868, at 3 o'clock, P.M., at the new Hall of the College of Pharmacy.

Treatment of Whooping Cough by the Inhalation of Carbolic Acid.

BY V. W. BLAKE, BIRMINGHAM, ENGLAND.

Many of my patients suffering from whooping cough having derived great benefit from the inhalation of carbolic acid, I have designed a simple apparatus, manufactured by Mr. T. P. Salt, of Bull street, Birmingham, for the evaporizing and diffusion of the carbolic acid in the atmosphere of the rooms occupied by the patients. The effect of its inhalation on whooping cough is marked by its quickly reducing the frequency of the cough and cutting short the spasmodic paroxysm. I have some cases of phthisis pulmonalis under the same treatment, which, I have every reason to believe, are much benefited by its inhalation. As a fumigator, and disinfecting agent in fevers, &c., I think the evaporizer will prove very useful; and I now invite my professional brethren to make trial of it. In whooping cough its success is very great.—*Medical Times and Gazette*.

Test of the Digestive Power of Pepsin.

Mix 10 grs. of the powder with $\frac{1}{2}$ oz. of water and 60 grs. of pure moist fibrin; apply a heat not exceeding 100 degrees Fahr. (the temperature of the stomach) for about half an hour, stirring the mixture occasionally, when the process of digestion will be found to have commenced, the fibrin becoming soft and pulpy. By continuing this operation a few hours a solution is effected, such as occurs in the stomach. By adding a few drops of lactic acid the process will be more rapid.

A Useful Hint.

In Vienna the use of sulphate of iron as a deodorizer has had a most beneficial result. According to *La Presse* the rats have been so effectually destroyed by the use of green vitriol, that recently Prof. Hurl was unable to procure a supply of these animals for experimental purposes. There is no better or cheaper substitute known as a deodorizer, and if it results in a wholesale destruction of these pests we would advise its use freely.—*Exchange*.

Patent Stopper.

Messrs. Prudencio, Cooper and Cotterell, of Bath, Eng., have patented a stopper for bottles, which is described as follows in the *Practical Mechanics' Journal*:

"This invention relates to that class of stoppers, for bottles and other like receptacles, which are self-closing, and in which the valve or stopper itself is contained inside the bottle or other receptacle. According to this invention a self-closing stopper is constructed, which does not necessitate any special form of neck, but may be applied to ordinary bottles. The improved stopper consists of a tube of metal, which is free to slide through a metal or other collar, which rests on the top of the neck of the bottle or end of the cock, an india rubber or other packing ring serving to keep the tube in a central position, as well as to prevent any leakage at that part. The inner end of this sliding tube carries a disc valve of india rubber, which closes against the inner shoulder of the neck of the bottle, or against the inside of the aperture in the case of a cock. A helical spring surrounding the outer portion of the tube, and confined between the collar and a cap or dome, on the extreme outer end of the sliding tube, serves, in conjunction with the internal pressure, to keep the valve perfectly tight. When it is required to draw off the contents of the bottle or vessel, it is simply necessary to depress or force inwards the dome or cap, whereupon the valve is opened and the liquid passes through the tube, and is discharged at the outer end thereof."

Soups, broths or jellies may be prevented from turning sour in the sick room by stirring in a few drops of the solution of bi-sulphate of lime, which does not impair the taste in the least.

Physiological Action of Theine.

Chemical analysis has shown that tea contains the same crystallizable, nitrogenized principle as coffee and cocoa. Dr. Leven conceived that it would be useful to determine, by experiments, whether the physiological effects were the same. Having already experimented with caffeine, he determined to experiment with theine on frogs and Guinea pigs. The following are his conclusions:

1st. Theine and caffeine, considered as one and the same alkaloid by chemists, seem to produce different toxic effects on animals submitted to their action.

2d. Theine is a less powerful toxic than caffeine, and it is only when given in double doses that the former produces the toxic effect of the latter.

3d. Theine also produces convulsive movements in the limbs, which Dr. L. has not observed from the action of caffeine.

4th. In other respects their physiological effects are identical. Both alkaloids seem to directly excite the heart and respiratory movements, and to increase arterial tension. By exciting the circulation they stimulate the central nervous system, the brain and spinal marrow, but they do not arrest the functions of the spinal cord and nerves. The tetanic convulsions resulting from their action is caused by the stimulation of the spinal cord. They do not abolish the functions of muscle; the heart does not cease to beat immediately after death."—*Archives de Physiologie Normale et Pathologique*.—*Journal Med. Science*.

Flowers of Sulphur in Croup (Lagauldrie).

In a case of croup I took a tablespoonful of flowers of sulphur, which I mixed in a glass of water, and recommended a tablespoonful of the mixture to be given every hour, after shaking. The next day the child was better and the prescription was renewed. The third day I ceased my visits, the child being cured, having only a loose cough, which I attributed to the false membranes hanging loose in the trachea, and of which I requested the parents to advise me if they were expectorated. Two days afterwards a violent fit of coughing expelled them, and three pieces, already dry, and each as large as a good sized bean, were brought to me.

From this day to the 23d of May six other cases presented themselves; the oldest child was seven years, and the two youngest were respectively twenty and eleven months old, and I declare that the treatment of large doses of sulphur, systematically used, worked miracles, in saving from a certain and early death these seven children; the treatment in no instance lasted more than two days.

The remedy has the incontestable advantage of being entirely harmless.—*Bouchardat's Annual Abstract*.

Cod Liver Oil.—A means of Replacing It.—BOULAND.

Cod Liver Oil,.....	33 drachms.
Alcohol, (40 deg.).....	20 "
Essence of Peppermint,.....	1 "

We obtain by this an emulsion, of which the dose is a tablespoonful three times a day.

The above formula has given Dr. Rouland satisfactory results; however, he has met with cases of phthisis in which the stomach rejected the oil, even thus subdivided. In these cases, as in those in which the use of cod liver oil has been too prolonged, he has advantageously replaced it by an oleo-phosphatic mixture, in the following proportions:

Oil of Sweet Almonds,.....	20 drachms.
Butter of Cacao,.....	1 "
Alcohol, (40 deg.).....	10 "
Syrup of Wild Cherry,.....	13 "
Tincture of Orange Peel,.....	1 "
Phosphate of Lime,.....	1 "

Mix and dissolve.—*Abeille Méd.*—*Bouchardat's Annual Abstract*.

Is Consumption Contagious?

Eminent French, English, and American physicians advocate the doctrine that "consumption is catching." Morgagni, one of the greatest medical lights of his time, was such a firm believer in the opinion, that he never would assist in the examination of a person who had died of the disease. Some of the most distinguished writers, as well as some of the most celebrated and successful practitioners in that disease, have eventually died of it themselves, among whom were the great Laennec, Morton, Wooster, and not forgetting the empiric, St. John Long (so said).

A large number of persons, evidently consumptive, will be found, on inquiry, to have had a husband, wife, sister, or child to have died of that disease. Statistics seem to show that a wife, whose husband is consumptive, is more liable to consumptive disease than a healthy husband with a consumptive wife; the reason of this, if true, will suggest itself to the thoughtful.

Introducing the matter of small pox into the system prevents small pox. Laennec inoculated himself with consumptive matter, but it did not "take." He subsequently died of consumption himself. He made this experiment to show that consumption was not inoculable. M.M. Alberti and Bielt thought that cancer was not communicable by the matter of cancer, and to prove it, tried to inoculate themselves with it, but it did not "take." Both of them died afterwards from cancer.

It is most probable that consumption is not of itself communicable—that it cannot beget consumption in one who has vigorous health and is perfectly free from all taint of the disease. But if any person who has not a vigorous constitution, whether inclined to consumption or not, lives, eats, and sleeps with a consumptive, as man and wife do, as a sister is apt to do with a consumptive sister, or a mother with consumptive children, such persons will very generally die of consumption themselves, not from its communicability, *per se*, but from the foulness of the atmosphere about a consumptive—from warm rooms, decaying lungs, large expectorations, sickening night-sweats, and bodily emanations; but the same amount of exposure to air made foul in any other way would light up the fires of consumption in one of feeble vitality or broken constitution. It is best, therefore, that the nurse of a consumptive should possess the most vigorous health; and to make assurance from infection doubly sure, the most scrupulous cleanliness possible should be observed, and carried out in every conceivable direction, extended to every minutiae, and maintained with the most inveterate constancy through every hour of the twenty-four, not allowing any excretion, even a single expectoration, to remain about the person, bed, or room for one instant. An incessant ventilation should be going on in the chamber—the best method for which, under most circumstances, is simply to keep a fire on the hearth and an inner door open; even in mid-summer this is better for the patient, as well as for the nurse, than a room kept closed all the time, from an almost insane dread of taking cold.—*Hall's Journal of Health*.

Bromide Potassium.

J. H. Bill, M. D., of the U. S. Army, gives his opinion, in the *American Journal of Med. Science*, after thorough experimenting, that bromide of potassium, in its legitimate action, is an anæsthetic to the nerves of the mucous membrane, and a depressor of their action—its hypnotic effects being secondary.

To Prevent Oxidation of Sulphate of Iron.

To prevent oxidation of Sulphate of Iron, we have the authority of Mr. George Milborn, that a small lump of camphor, screwed up in tissue paper, and put into a bottle with the ferrous sulphate, will entirely prevent oxidation.

Phosphorus a Century ago.

We present to our readers a few extracts from a work on Chemistry, published nearly a hundred years ago, for the purpose of showing the advancement in science.

The article on Phosphorus is especially interesting, considering the various uses to which it is applied at the present day:

"Phosphorus, in physiology, is a denomination given to all bodies which shine, and seem to burn, without having any degree of heat; and that these bodies owe their lucidity to the motion of the parts seems evident, for the following reasons. 1. Several phosphori are undoubtedly owing to putrefaction, as rotten wood, very stale meat, especially veal; some sorts of fish long kept, as oysters, lobsters, flounders, whittings, &c., which putrefaction is the effect of a slow and gentle fermentation, or intestine motion of the parts. 2. Most phosphori have their light so weak as to shine only in the dark, which seems to argue a lesser degree of velocity in the parts than what is necessary to produce heat; because this last degree of velocity will cause bodies to shine in open daylight. 3. Some phosphori are the parts of animated bodies, as the cicindela or glow-worm; but all the parts of an animal are undoubtedly in motion. 4. Other phosphori put on the appearance of flame, as the *ignis fatuus*, the writing of common phosphorus made from urine, flashes of lightning, &c.; but all flame is nothing but a kindled vapor, whose parts are all in motion, which may be too weak to cause burning, or even a sensible degree of heat. 5. Several of those innocent lambent flames may have their matter so agitated, or the velocity of their motion so increased, as actually to produce heat and burn; thus, the writing of phosphorus on blue paper, sufficiently rubbed, will kindle into an ardent flame and burn the paper. 6. Phosphori seem to have the essential nature of fire, because they are so easily susceptible of a burning quality from fire—thus, common phosphorus is immediately kindled into a most ardent and inextinguishable flame by common fire. 7. By stroking the back of a black horse or cat in the dark we produce innumerable scintillæ or lucid sparks; in the same manner the rubbing a piece of black cloth, which has hung in the sun to dry, will cause it to throw out the particles of light which it had imbibed from the sun; whereas, a white piece of cloth, which reflects most of the sun's rays, emits no such lucid sparks in the dark. Many other reasons might be urged to show that light of every kind is owing to one and the same cause, in a greater or lesser degree, viz., the velocity of the parts of the lucid body. Phosphori, in general, says Lemer, may be considered as so many sponges full of the matter of light, which is so slightly retained therein that a small external force is sufficient to put it in motion, and cause it to exhale in a lucid form. Thus the phosphori made of human urine and other chemical preparations receive so large a proportion of fire in their preparation, and retain it so well in their unctuous substance, that it may be kept there in water for twenty years, so as upon the first laying them open to the air they shall take fire and exhale in lucid flames. Not that the fire is supposed to be fixed and quiescent all the while in the body of the phosphorus, for that it has a real motion all the time is evident—hence, that it is seen in any dark place, in the summer season, fluminating and emitting flames (though, with all this, it scarce loses anything of the fire), so that the fire is not fixed in the phosphorus, but in a continual undulatory motion. Chemistry, says Dr. Shaw, hath scarce afforded anything more surprising than the common phosphorus. To see letters traced with this matter become luminous in the dark, images and the bodies of men to blaze with light, and abundance of the like experiments, performed by means of phosphorus, must awaken the curiosity of those who have seen these experiments, and render them desirous of being acquainted with the method of preparing it. The preparation, even to this day, is kept as a secret in few hands, and the matter sold at a very great price; whence, we apprehend, it would be no unacceptable present to the world to render this commodity cheaper and discover its further uses.

FOR SOFTENING GLASS. Take the blood of a he-goat and a duck, some dregs of oil and vinegar, mix these things together and put them into a varnished earthen pot; let the whole be warmed a little, and afterwards, having put some glass in, let it there remain till it becomes soft."

Influence of Anæsthetics on the Brain.

Dr. Richardson, in his lecture (published in the *Medical Times and Gazette*) on the influence of anæsthetics on the brain and nervous system, concludes that anæsthetic vapors act directly upon nerve matter, either by preventing the development of force or by stopping conduction.

He says, in reference to it: "The obvious fact that the motion of the heart and the movements of respiration continue in action while the rest of the body is under the narcotic effect, during anæsthesia, proves that the whole nervous system is not involved, and that the involuntary and semi-voluntary muscular mechanism is also not involved, except when extreme and fatal symptoms are developed. What parts, then, are influenced by an anæsthetic? The idea was almost intuitive that the brain was the organ affected, and that the centres of consciousness are those chiefly held in abeyance. But, to prove this as true, experiment was necessary. In proof, the lecturer took a large pigeon, narcotized it deeply with chloroform, and in this state passed through its body, from the head to the foot, a rapid intermittent induction current. The bird instantly arose from the table, extended its wings, opened its eyes, and seemed as if restored; the current was then stopped, and the bird was shown to be as deeply asleep and as powerless as before. Another bird was put to sleep by freezing the brain, and when utterly insensible, was subjected to the electrical shock in the same way, when it flew from the table into the room, where, breaking its connection with the battery, it dropped on the floor comatose, motionless, and as anæsthetized as before, in which condition it remained for many minutes. The lecturer, in these experiments, demonstrated that the anæsthetic action is localized in the cerebrum. His battery was like an outer brain, which supplied power without intelligence, and which, by the effects of its current, showed that all the muscular elements were ready for work, and only awaited the order from the brain. The lecturer next discussed the question—what, during the process of anæsthesia, leads to this change in the brain? Is there a chemical action on albumen? Is there pressure on brain matter? Is there deficient oxidation of the blood? Is there contraction of blood vessels, and diminished supply of blood from that cause? All these hypotheses were experimentally tested and negatived."

Elatarium.

Dr. A. G. Craig, in the *Western Journal of Medicine*, reports the death of a patient following the administration of two-fifths of a grain of elatarium. He says: "I report this case to warn the practitioner against commencing with the dose of elatarium recommended in the *U. S. Dispensatory*, 12th edition, page 364. 'The full dose of commercial elatarium is often from one to two grains; but, as in this quantity it often vomits, if of good quality, the best plan is to give it in the dose of a quarter or half of a grain, repeated every hour until it operates.' I learned, on my second visit to this patient, that a tablespoonful of castor oil usually operated within five minutes after administration, and that the sulphate of magnesia, in an ordinary dose, purged her almost as severely as the elatarium, and produced similar dejection. It would be well for the practitioner to inquire into the idiosyncrasies of his patient before administering remedies, which I regret I neglected to do in this case."

FOUCHER'S DRESSING FOR WOUNDS.—A solution of two drachms of potasse chloras and four fluid ounces of glycerine, mixed with two and a half ounces of alcohol, forms a clear liquid, which is readily absorbed by linen, and does not soil the clothing. It keeps the dressing moist for twenty-four hours, is easily washed off with lukewarm water, and is well adapted for soft granulations.—*Journal de Médecine de Bruxelles*.

Bad News for Rats.

Recent experiments show that squills, the enormous bulbous root of which is much used in medicine, is not only a powerful poison for rodents, but also one they are very fond of. The way of preparing it for the desired purpose is as follows: "One of the bulbs is cut into slices, hashed and bruised, then done in the pan with fat, which is afterwards strained through a cloth and poured into broken plates and saucers, to be placed in the cellars and other places infested with rats, mice, &c. To prevent dogs and poultry from eating of this poisonous compound in stables, pigeon-houses, or farmyards, it may be put into a wooden box, about a foot and a half long, and having a hole at each end. The rat gets in at one end and goes out at the other, after partaking of the noxious food, which soon kills it. Squills may also be reduced to powder for the same purpose, by bruising them in a mortar to a pulp, which is afterwards incorporated with as much flour as it will hold. The paste is then rolled out, as they do for a pudding, then cut into shreds, which are left to dry on hurdles or on sheets of pastboard, and are afterwards pounded in a mortar. The powder thus obtained will keep for years, and may be put into boxes or barrels. If manufactured on a large scale, it may become a profitable article of exportation. In Algeria squills cost nothing, the country being absolutely overrun with them."—*English Paper.—Cultivator and Country Gentleman*.

Novel Filters.

The *Journal of the Franklin Institute* for May says: "Among the novelties exhibited at the last meeting of the Institute, and which were shown by Professor Rogers, were some very ingenious filters, brought by him from Paris, consisting of a hollow block of very porous stone or coke, closed by a cork, through which a glass tube, connected with one of india rubber, was inserted. The stone being sunk in the solution which it is desired to filter, and the air being drawn out by the mouth from the other end of the tube, the water or solution then syphons over, and most of the impurity is arrested by the porous substance."

These ingenious filters above mentioned are not of French origin, but were first invented and known, and we believe, patented in this country about 1861. Very similar instruments, consisting of small cylinders of a sort of artificial porous stone, and provided with a small rubber tube and metallic or ivory mouth-piece, all enclosed in a little case to go in the pocket, were common in market, and recommended for the use of our soldiers during the late war, and for travellers, &c.

They were used by inserting the porous cylinder in the spring or stream, and placing the ivory tip in the mouth and exhausting the air until the fluid, fully purified, entered the mouth. An improvement was also known in the material called the "pocket charcoal filter," wherein charcoal was employed to form the hollow cylinder, by some process of conglomeration or cementation.—*American Gas-Light Journal*.

The Diamond.

M. Saix indicates, in his memoir "upon the production of the diamond," a process which he believes could be employed for the "manufacture of black, colored and colorless diamonds." This process is founded on the principle that a current of chlorine, or of hydrochloric acid gas, passing over fused cast-iron, forms perchloride or protochloride of iron, both of which volatilize, leaving the carbon present in the mineral intact, since the chlorine ought not to unite directly with the carbon. The crystallization of the carbon could thus be effected, according to the author, following the general rule for crystallization produced in a solution of a substance susceptible of crystallization, whenever the solution is evaporated. The size of the crystals depends always upon the slowness of the evaporation. Your readers will doubtless praise the disinterestedness of a savant who thus leaves others to gather golden apples.—*Paris Correspondence of Chemical News*.

Acute Synoritis of Knee Joint Suppuration.—Treatment by Carbolic Acid.

BY T. HAMILTON, M. B., F. R. C. S. E.

On Monday, the 22d of June last, I was called to see J. M—, a young woman aged twenty-two. She told me that whilst at work, three days before, she was seized suddenly with pain in her left knee, which swelled soon afterwards. Since then the pain and swelling had increased. I found the joint much swollen and red, with distinct fluctuation on each side. Ordered hot fomentations and rest. During the next three days she continued in much the same state. On Friday, June 26th, as suppuration had evidently taken place, having previously dipped the knife in a strong solution of carbolic acid, I evacuated between six and eight inches of pus, by incisions about an inch and a half long, on each side of the joint. I allowed the matter to escape under what Prof. Leister has termed the anti-septic veil. A paste of carbolic acid, linseed oil (one part to three) and whiting was applied to the wound, on lead paper—I could not obtain tin-foil. Slight pressure was placed on the sack of the abscess by two pads of lint on each side of the joint, with a bandage. Next day I found the patient free of all pain; pulse 80; serum escaped, but no pus, and since then none has come from the wound. For the next four days I applied carbolic paste, but each day weaker.

July 1st.—Swelling entirely gone. No pain, no discharge, wounds superficial, and nearly healed; slight excoriation of the neighboring cuticle, from the action of the carbolic acid, for which I applied water dressing. This case requires no comment. The rapid cure was, without doubt, due entirely to my having adopted the plan of treatment suggested by Prof. Leister, and I would venture to say that, under no other form of treatment a present employed, would so satisfactory a result have been obtained in six days from laying open the joint. To-day (July 2,) though I still keep the joint comparatively at rest, the patient can move it freely, without the least pain.—*Lancet*.

Pyrethrum Roseum a Remedy for Insect Bites.

A well known German traveller, F. Jager, in his "Sketches of Travels in Singapore, Malacca and Java, (Berlin, 1866), describes the powder of the *Pyrethrum Roseum* as a specific against all noxious insects, including the troublesome mosquitoes, and those which attack collections. He says, "A tincture prepared by macerating one part of the *Pyrethrum Roseum* in four parts of dilute alcohol, and, when diluted with ten times its bulk of water, applied to any part of the body, gives perfect security against all vermin. I often passed the night in my boat, on the ill-reputed rivers of Siam, without any other cover, even without the netting, and experienced not the slightest inconvenience. The 'buzzing,' at other times so great a disturber of sleep, becomes a harmless tune, and, in the feeling of security, a real cradle song. In the chase, moistening the beard and hands protects the hunter against flies for at least twelve hours, even in spite of the largely increased transpiration due to the climate. Especially interesting is its action on that plague of all tropical countries, countless numbers of ants. Before the windows, and surrounding the whole house where I lived at Albay, on Luzon, was fastened a board six inches in width, on which long caravans of ants were constantly moving in all directions, making it appear an almost uniformly black surface. A track of the powder, several inches in width, strewed across the board, or some tincture sprinkled over it, proved an insurmountable barrier to these processions. The first who halted before it were pushed on by crowds behind them, but immediately on passing over showed symptoms of narcosis, and died in a minute or two, and within a short time the rest left the house altogether."—*British Medical Journal*.

Questions Asked and Answered on the Practice of Medicine and Surgery.

A portion of our space will be devoted to the opinions of physicians in reference to the best treatment of diseases, and their success in the use of remedies. All questions and answers must necessarily be concise, so as to present the ideas of as many physicians as possible:

What has been your success in the use of bromide of potassium, and in what diseases is it most particularly indicated?

What is the best treatment for Chronic Rheumatism?

What is the best treatment for Dropsy?

Why is Consumption constantly carrying off such crowds of victims, and what is to be done about it?—*Dr. O. W. Holmes.*

What course of treatment is effectual in Salt Rheum?

To Prevent Pitting in Small Pox.

Dr. J. Richardson, of Louisville, Ky., recommends, in the Richmond and Louisville *Medical Journal*, the use of Glycerine and Bismuth in small pox, mixed so as to form a thick paste, and smeared over the body, and finally the whole covered with oil silk. He says the annoying symptoms of itching seemed immediately to subside, as well as the nervous symptoms under which patients suffer, and also the extensive pitting was in a measure modified.

Dr. Black, in the *London Lancet*, mentions several cases where pitting in small pox was entirely prevented by covering the face with lard and entirely excluding the light from the room.

The medical treatment pursued in each of the cases consisted in administering from one to two drachms of the solution of acetate of ammonia with two or three drops of the solution of arsenite of potash, every second or third hour from the commencement of the initiatory stage to the acumination of the pustules, from which period to the completion of the stage of desiccation the dilute nitric acid, in doses of three to five drops, was substituted for the acetate of ammonia only. The diet consisted chiefly of milk and light farinaceous food, with cooling drinks, during the earliest stages of the disease—and of these, with the addition of beef tea, chicken broth and similar food, as the maturation of the pustules progressed.

How Quacks were Used in the Fourteenth Century.

The corporation of London have published a very interesting volume, which is edited by Mr. Riley, entitled "Memorial of London and London Life in the 13th, 14th, and 15th Centuries." These memorials consist mainly of a series of extracts from the archives of the City of London. The condition of our profession at the time is illustrated by a number of interesting facts.

However much we may have improved in many respects, it is certain that our forefathers had a keen sense of their duty towards unqualified persons, who assumed to be possessed of medical knowledge. They were punished with a rigor which would be incompatible with modern customs, but which affords a striking contrast to the lenient way in which medical imposters are now treated. The following instance, in particular, is worthy of mention:—One Roger Clark professed to be learned in the art of medicine, and prescribed for a woman suffering from fever, the hanging of a certain document around her neck, containing certain words, which he stated were an antidote to the disease under which she suffered. The charm did not work. He was summoned before the Mayor and Aldermen in the Guildhall of London, at the instance of the husband of the patient, to show upon what authority he practiced the art of medicine.

His own statement was sufficient to convict him of being a rogue and an imposter, and he was forthwith

ordered to be placed in the pillory, and therein to be punished for the offence he had committed against society. His progress to the pillory is thus graphically described: "It was adjudged that the same Roger Clark should be led through the middle of the city, with trumpets and pipes, he riding on a horse without a saddle, the said parchment and a whetstone, for his lies, being hung about his neck, an urinal also being hung before him and another urinal on his back." The offence which Roger Clark committed was venial, compared with some of the flagrant crimes which quacks now-a-days too frequently perpetrate. If he was righteously punished, how should we mete out punishment to the harpies and villains of our time, who prey upon the weakness and credulity of the miserable victims who are attracted by their infamous advertisements to place themselves under their care?—*Lancet.*

The Use of Medicines During Menstruation.

In a work lately published at Paris, by M. Raciborski, the author endeavors to show that the prejudicial effects of remedies used during menstruation have no existence. He considers that our acquaintance with the physiology of this function should destroy a prejudice existing both in and out of the profession. M. Raciborski has prescribed emetics and purgatives during the catamenia, and even venesection, without, in the least, disturbing menstruation.

A great point, according to the author, is to explain to the patient that no ill consequences will result from therapeutic interference during the catamenia, as her apprehensions might otherwise prove uncomfortable. Of course, no remedies should be used except they be very clearly indicated.—*Lancet.*

Balls of Raw Meat (Damecy).

The following is the process of M. Damecy, given in the "Revue Thérap. Méd. Chir., No. 24, 1866:"

Take muscle of beef, any quantity wished; cut it in pieces weighing from 60 to 80 grains, pound them in a mortar and pass through a hair sieve.

The pulp thus obtained is extremely fine, and is divested of all tendinous and poneurotic parts.

Add about one half of one per cent. of pounded salt, and divide the mass into balls weighing from 15 to 30 grains, and roll them in sifted bread-crumbs. The crumbs may be previously seasoned with a little parsley, tarragon, or other sweet herb, chopped very fine.

Thus prepared, these raw meat balls have an agreeable aspect; the repugnant red color of flesh, modified by the white bread crumb, reminding one of the rosy hue of raspberries.—*Bouchard's Annual Abstract.*

Improved Mode of Embalming.

A probably exaggerated account of M. Marini's discovery has been published by a French paper, *Les Mondes*. It would appear that M. Marini succeeds in preserving parts of, or the whole body, with all the solids and fluids of the living organism, such as muscle, blood, brain, &c., either in a mummified or petrified state. He can, besides, when the ossification has not been carried too far, bring the mummified portions back again to their original volume and look, so that an arm, for instance, may be transformed for many months into the same state as that observed soon after death. Indeed, the paper above alluded to gravely says that in Corsica M. Marini preserved the body of a deceased far-famed historian to such a degree that, four months after death, he managed, by his reviving fluid, to give again to the corpse all the appearance of life, so much so, as to place it in a chair for photographic purposes. The Emperor and Empress of the French are said to be delighted with the discovery, which statement will in all likelihood be taken by most people *cum grano salis*.—*Lancet*.—*American Artisan*, Aug. 5th.

Chloroform in Poisoning by Strychnia.

Ed. MEDICAL TIMES AND GAZETTE.

SIR—In your number for May 9th I notice a case of strychnia poisoning successfully treated by chloroform. Its perusal reminds me of a somewhat similar case I had under my charge when House Surgeon to the Northern Hospital, Liverpool, five years ago. The subject was a girl about 14 years of age, maid-of-all-work, who, owing to the cruelty of her mistress, had deliberately purchased and swallowed three pennyworth of ratsbane in a bottle of ginger beer, bought for the purpose.

Soon after taking the same the usual symptoms of strychnia poisoning came on, when an emetic was given her by a neighboring surgeon, which caused her to vomit, but not very freely. She was then taken at once to the Northern Hospital, and, as the symptoms were assuming an alarming character, chloroform was at once administered, with marked remission of symptoms. This was, almost without interruption, repeated for some hours, as it was only so that relief could be obtained. But the fact of the chloroform being administered is not the point to which I would call attention. It is this—that while the patient was under its influence, we succeeded in passing the stomach pump, for the double purpose of washing out the stomach (which process was repeated three or four times) and injecting beef tea and brandy, and thereby supporting the patient's strength. But for this plan being adopted, I firmly believe she would not have survived. On investigation, it was found that a similar packet to the one taken contained one grain of strychnia. The patient was under observation for two or three days, and was discharged cured, and truly thankful that her rash act was not attended by more serious results.

I am, sir,

E. P. PHELPS, M. A., Oxon.

The Present Raid on the Uterus.

The following extract from the address of Dr. W. D. Buck, before the New Hampshire Medical Society, is copied from the *St. Louis Medical Reporter*: "The uterus is a harmless, inoffensive little organ, stowed away in a quiet little place. Simply a muscular organ, having no function to perform save at certain periods of life, but furnishing a capital field for surgical operations, and is now-a-days subject to all sorts of barbarity from surgeons anxious for notoriety. Had dame Nature foreseen this, she would have made it iron-clad. What with burning and cauterizing, cutting, and slashing, and splitting, and skewering, and pessarying, the old-fashioned womb will cease to exist, except in history. The Transactions of the National Medical Association for 1864 has figured in 123 different kinds of pessaries, embracing every variety, from a simple plug to a patent threshing machine, which can only be worn with the largest hoops. They look like the drawings of turbine water-wheels, or a leaf from a work on Entomology. Pessaries, I suppose, are sometimes useful, but there are more than there is necessity for. I do think this filling up the vagina with such traps, making a Chinese toy-shop of it, is outrageous. Hippocrates said he never would recommend a pessary to procure abortion, nay, he swore he never would. Were he alive now he would never recommend one at all. If there were fewer abortions there would be fewer pessaries, and if there were fewer pessaries there would be fewer abortions. Our grandmothers never knew they had wombs, only as they were reminded of it by a healthy foetus—which, by the by, they always held on to. Now-a-days, even our young women must have their wombs shoved up, and if a baby accidentally gets in by the side of the machinery, and finds a lodgment in the uterus, it may, perchance have a knitting-needle stuck in its eyes before it has any. It is the easiest thing in the world to introduce a speculum, and pretend to discover ulceration of the os, and subject a patient to this revolting manipulation once or twice a week, when there is, in fact, nothing the matter. By some practitioners all diseases which occur in the female are attributed to the uterus. In this class are especially to be included all such as make of the abnormal conditions of the uterus a specialty."

Questions Asked and Answered on all Subjects Relating to Chemistry and Pharmacy.

A portion of our space will be devoted to the discussion of topics relating to the best mode of preparing medicines, official or unofficial, and all subjects of practical pharmacy.

What is the best formula for making Citrine Ointment, so as not to deteriorate?

What is the best method for making Tincture of Kino, so that it will not gelatinize?

In the preparation of Fluid Extracts is Cold Expression equal or superior to the method of the U. S. P.?

Are not Elixirs preferable to Syrups or Tinctures, and should they not be made official?

Testing Flour with Chloroform.

M. Rakowitch proposes a method of examining flour by means of chloroform. The following are the results which, he says, may be gathered from an experiment capable of being made in a few minutes—the amounts of bran, the mixture between 10 and 25 per cent., the damaged flour, the mineral matters, the ergot of rye, and other impurities. The whole of these are determined by the relative specific gravities of the different substances in chloroform. The flour is simply placed in a tube and mixed with chloroform. The chloroform is enabled to hold, in very thorough suspension, the pure flour, while the other materials are not thus suspended. By adding spirits of wine, of 95 deg., the flour is precipitated to the bottom of the tube. The more humid the flour, the more spirits of wine must be added, and thus the amount of humidity of the flour is arrived at.—*London Journal of Science*.

Professor Draper's Process for Silvering Glass.

Professor Draper recommends the following process for silvering glass mirrors: He divides the process into five operations, viz.: the cleaning of the glass, the preparation of the silvering solution, the warming of the glass, the process of silvering, and the polishing. (The description is for a 15½ inch mirror.) 1st. Rub the glass plate thoroughly with aquafortis, and then wash it with plenty of water, and set it on edge on filtering paper to dry; then cover it with a mixture of alcohol and prepared chalk, and rub it in succession with cotton and flannel. 2d. Dissolve 560 grains of Rochelle salt (tartrate of soda and potassa) in two or three ounces of water and filter; dissolve 800 grains of nitrate of silver in four ounces of water; take an ounce of strong ammonia of commerce and add nitrate solution to it until a brown precipitate remains undissolved, then add more ammonia, and again nitrate of silver solution. This alternate addition is to be carefully continued until the silver solution is exhausted, when some of the brown precipitate should remain in suspension. Filter just before using, mix the Rochelle salt and add water enough to make it 22 ounces. The vessel in which the silvering is to be performed should be a circular dish of ordinary tin plate, and coated with a mixture of equal parts of beeswax and rosin. At opposite ends of one diameter two narrow pieces of wood are cemented, to keep the face of the mirror from the bottom of the vessel. 3d. The glass is slightly warmed by putting it in a tub or other suitable vessel, and pouring in tepid water to cover the glass, then hot water is gradually stirred in. 4th. Carry the glass to the silvering vessel, into which the silvering has been poured, place the whole apparatus before the window, and keep up a slow rocking motion. Leave the mirror in the liquid twenty minutes or half an hour, and wash with plenty of water. 5th. When the mirror is perfectly dry take a piece of the softest buckskin, stuff it with cotton, and go gently over the whole silver surface, to condense the silver. The best stroke is a motion in small circles; rub an hour. The thickness of the silver thus obtained is about 1388 of an inch.

Charcoal Filters.

The employment of charcoal filters has long been advocated, on account of the known property of this substance to absorb and oxidize organic matter. Mr. W. Skeay, of New Zealand, has now shown that charcoal will remove arsenic from water. If a few drops of a solution of a salt of arsenic, or arsenious acid, be put into a few ounces of dilute sulphuric acid, and the mixed solution agitated at intervals with recently ignited charcoal for an hour or two, the clear liquid obtained by filtration does not manifest any reaction of arsenic when tested by Marsh's process. Tungstic acid is removed from acid solutions by charcoal, applied in like manner, and is given up to a solution of caustic alkali.

Extraction of Oil by Bysulphide of Carbon.

The extraction of oil, by means of bysulphide of carbon, is now carried on at Moabit, near Berlin, upon a very large scale. In the manufactory of M. Heyl 2,570 kilos. of oil, of sufficiently good quality to be employed in lubricating machinery, are manufactured daily. Colza and linseed are the materials chiefly operated upon; the residues serve very well to feed cattle with. The seeds are first crushed and dried by heating. For the daily fabrication of 2,570 kilos. of oil only six men are required. Analysis has shown the residue to contain only 2 per cent. of oil and 7 per cent. of water, while the residues of the ordinary pressure process contains 9 per cent. of oil and 15 per cent. of water. In the extraction of the oil 7,000 kilos. of bisulphide of carbon are used daily, and the amount lost is 28 kilos.

Mr. P. Pellogio has described a contrivance by means of which the troublesome "bumping" peculiar to certain liquids, when under distillation, may be entirely prevented. It consists of a glass tube, as wide as practicable, inserted through the tubulus, and reaching nearly to the bottom of the retort, and having the upper end bent at a right angle, and drawn out to nearly capillary dimensions, thus establishing a communication between the outer air and the interior of the retort. With the help of this arrangement, such liquids as *methylic alcohol*, sulphuric acid, petroleum residues, &c., distil as smoothly as alcohol or water.—*London Journal of Science*.

New Method of Preparing Magnesium.

A new method of preparing magnesium has been devised by M. Reichert. He takes 1,000 grammes of the anhydrous double chloride of magnesium and potassium, pulverizes it, and mixes it with 100 grammes of finely powdered fluor spar. This mixture is fused with 100 grammes of sodium. The compound proposed for use occurs in the mineral kingdom in tolerable abundance as *carrollite*. White pieces of this mineral are available, and require no previous treatment. Colored fragments must be dissolved in water, the impurities allowed to settle, and the lixivium evaporated.

Incompatibility of Pot. Iodid. and Potass. Chlorat.

This is an important point in practice, for in syphilis, to act at the same time upon the ulceration of the mouth and the general malady, chlorat. potass. and pot. iodid. are frequently given. This practice is dangerous, as has been frequently demonstrated by M. Vée; for the chlorate of potash, absorbed simultaneously with the iodide of potassium, may part with its oxygen and transform it into the iodate, a poisonous agent. The recent experience of M. Melsens proves the possibility of this transformation.

This ought to suffice to prevent, were it only as a precautionary measure, the simultaneous administration of the chlorate of potash and the iodide of potassium.—*Gazette Méd. de Paris*.

Sedative Astringents.

ON THE LEAVES OF THE CORPINUS BRCULUS, HORNBEAM. (*Amédée Blacher*).

The genus *carpinus* is not contained in any work on *materia medica*. The leaves of this shrub, so common in our woods, and which form the beautiful arbors of our gardens, contain as much as 9 per cent. of tannin. Their decoction produces a marked astringent upon the mucous membrane of the mouth, and the same effect is observed if the green leaves are chewed. The leaves of this plant, therefore, could be used in medicine, when an astringent is necessary, but regard should be had to the amount of tannin they contain, for they are equal in energy to rhatany. They may be prepared in all the pharmaceutical forms. I have made a *millia*, a *syrup*, a tincture, an aqueous and an alcoholic-aqueous extract, and these preparations appeared to act well. Experiments made by a distinguished practitioner of this place, Dr. Poisson, have confirmed my propositions. A very convenient preparation is a decoction, used as a lotion or gargle. It is to be remarked that the infusion which, without doubt, would be preferable in giving a less proportion of starch than the decoction, cannot be used on account of the risk of depriving the remedy of some of its activity, for I have observed an infusion made with 10 per cent. of the leaves still quite sensitive to reagents. A decoction is necessary to penetrate the thin but stout tissue of the leaf.

Besides its medical uses, it might likewise serve in the arts as a black dye.—*Bouchardat's Annual Abstract for 1867*.

Adulteration.

A bill to amend the "Act for preventing the adulteration of articles of food and drink, 1860," and to extend provisions to drugs.

1. Every person who shall admix, and every person who shall order any other person or persons to admix with any article of food or drink, any injurious or poisonous ingredient or material, to adulterate the same for sale, and every person who shall admix, and every person who shall order any other person or persons to admix any ingredient or material with any drug, to adulterate the same for sale, shall, for the first offence, forfeit and pay a penalty not exceeding fifty pounds, together with the costs attending such conviction, and for the second offence shall be guilty of a misdemeanor, and be imprisoned for six calendar months with hard labor.

2. Every person who shall sell any article of food or drink with which, to the knowledge of such person, any ingredient or material injurious to the health of persons eating or drinking such article has been mixed, and every person who shall sell as pure and unadulterated any article of food or drink, or any drug which is adulterated, or not pure, shall, for every such offence, on a summary conviction of the same before two justices of the peace, at the petty sessions in England, and in Scotland before two justices of the peace, in the justices of the peace court, or before the sheriff substitute of the county, or before justices at petty sessions, or a divisional justice in Ireland, forfeit and pay a penalty not exceeding twenty pounds, together with such costs attending such conviction as to the said justices shall seem reasonable; and if any person so convicted shall afterwards commit the like offence, it shall be lawful for such justices of the peace to cause such offender's name, place of abode, and offence to be published at the expense of such offender, in such newspaper, or in such manner as to the said justices shall seem desirable.

The bill also proposes to make it compulsory for municipal and other local authorities to appoint salaried analysts, by whom articles of food or drink, and also drugs, are to be analyzed for small fixed fees.—*London Pharmaceutical Journal*.

The Physician and Pharmacist.

NEW YORK, AUGUST, 1868.

We are unable, in the first number of THE PHYSICIAN AND PHARMACEUTIST, to carry out our design of presenting the views of a large number of physicians, in reference to the treatment of diseases that often baffle their skill, and their opinion of remedies whose therapeutic value has not become established. There are many physicians that have had large experience in the treatment of some diseases and use of certain remedies, who possess valuable ideas, which would not only interest, but would prove of great value to the profession at large. There are also but few druggists that cannot communicate some important facts relating to improvements in pharmaceutical manipulations, &c. A department of this character in our publication will undoubtedly be highly interesting and profitable, and will be read by every physician and druggist, especially if presented in a short and concise manner.

In future numbers we shall carry out this idea, and we therefore respectfully invite physicians and druggists throughout the country to answer the questions asked in the present number, and to propound any others, the answers to which would be generally interesting.

The success of THE PHYSICIAN AND PHARMACEUTIST is already established. It will probably be published monthly after the issue of the second number, and positively after the first year.

It will be devoted to the interests of no special party, and will always expose quackery, no matter in what disguised form it may be presented. We shall endeavor to select such matter as will be read with interest both by physician and druggist, and make each successive number superior to the one preceding, until it ranks as a gem among medical and chemical publications, and reaches every physician and druggist in the country.

A large portion of the reading matter in the next number of THE PHYSICIAN AND PHARMACEUTIST will be original, having secured some of the best talent in the country in the departments of Medicine and Pharmacy.

We shall mail the present number of THE PHYSICIAN AND PHARMACEUTIST to a number of Physicians and Druggists who are not subscribers. All those who wish to subscribe will please remit 50 cents in currency or postage stamps. Postage, if paid in advance, 4 cents per year.

Let Justice be Done.

Why should not the chemist or pharmacist, who makes use of his time and money in experimenting and improving the science of pharmacy, receive some compensation to repay him for his labor, as well as any other inventor? We are bitterly opposed to every form and kind of quackery, and think that no physician should prescribe a new remedy when the formula is not given by the manufacturer, so as to bear strict analysis; but when this is done, is it not clearly the duty of the profession, in prescribing medicines of this character, to designate the name of the producer, until such preparations

are made official, or, at least, until he receive sufficient recompense for his time and trouble.

If the profession will not do this it will indirectly encourage quackery, by compelling chemists to patent their new and valuable discoveries.

At the present day, as soon as a new and valuable pharmaceutical preparation is produced, and the formula published, a host of irresponsible, and we might very truly say, in many respects, unprincipled houses, immediately add it to their list, and send it broad-cast among the profession, bearing the imprint that each one possesses the entire claims to originality.

We originally produced and published the formulas of Elixir Calisaya, Iron and Bismuth, Elixir Cinchona, Iron and Strychnia, Elixir Pepsin, Strychnia and Bismuth, and several other valuable preparations—since which time they have been manufactured by ten or twenty houses throughout the Northern States, not one of which has, to our knowledge, given us the least credit as originator, but, on the other hand, some of them have gone as far as to copy the language we use on our circular in connection with these preparations, and others have endeavored to evade copying us by ridiculously calling their preparation Ferro Phosphorated Elixir Calisaya with Sub-Carbonate of Bismuth, when every physician knows that Sub-Carbonate of Bismuth is not to any extent soluble, the Ammonia Citrate being the only salt of Bismuth soluble in water. We have recently added to our list several new original preparations, and we can reasonably predict that, within a few months, they will be transferred to the circulars of numerous manufacturers, without any acknowledgment of the credit due us. We were led to make these remarks from reading an article on Prescriptions, from the London *Pharmaceutical Journal*, which we copy in the present number of THE PHYSICIAN AND PHARMACEUTIST.

A New and Important Invention.

Patents have recently been issued, in England, to Mr. Alexander Parkes, and in this country to Dr. William H. Pierson, of Orange, N. J., and Dr. John A. McClelland, of Louisville, Ky., for a process to convert the Official Collodian into a hard substance like ivory.

The process consists in slowly evaporating the Collodion to a plastic consistency, and when in this state it is moulded into any shape desired.

This substance, being perfectly transparent, can be colored so as to represent any article desired, and is adapted to the manufacture and imitation of all hard substances. We consider it one of the most important discoveries of the age.

Impure Medicines.

The evil of adulterating medicine is undoubtedly very common in this country, and unless this atrocious crime is checked, the practice of medicine, as far as the application of remedies for disease is concerned, will become, in a great degree, useless. Should it not be dealt with as a heinous offence for any manufacturer or dealer to send out, knowingly, a preparation with a lying label on the bottle?

The physician is called to the bedside of a patient with an acute attack. He prescribes the remedy indicated, and which is almost certain, if pure, to give relief; yet little or no effect is produced, and death follows. It is not to be presumed that medicines will always cure, but is not the manufacturer or dealer, in many cases, directly responsible, and should he not be held accountable in the eyes of the law.

In most cases of this kind the physician is blamed for want of professional skill, and loses his hard earned reputation, when the real party at fault is the unprincipled manufacturer or dealer. We believe this subject should be agitated until our Legislatures pass a law similar to the one about being enacted in England, the articles of which may be found on page 9.

Annual Abstract of Therapeutics, Materia Medica, Pharmacy and Toxicology, for 1867; followed by an original memoir on gout, gravel, and urinary calculi, by A. Bouchardat, professor of Hygiene to the Faculty of Medicine, Paris, Member of the Imperial Academy of Medicine. Translated and edited by M. J. De Rosset, M. D., Adjunct to the Professor of Chemistry, University of Maryland, Member of the Maryland Academy of Sciences.

We have thoroughly examined the above re-print, and unhesitatingly pronounce it one of the most valuable works extant. It contains the practical portion of the advancement in medicine and pharmacy of the old world, and which has heretofore generally been unavailable to the physician and druggist in this country.

It should be in the hands of every pharmacist and medical man who desires to keep pace with the times and acquire most valuable information.

Notices.

We are personally acquainted with hundreds of Physicians who are prescribing Fougere's Iodinated Cod Liver Oil, all of which speak of it in the highest terms, and we, therefore, fully endorse the following notice from the Richmond and Louisville *Medical Journal*:

FOUGERE'S COD LIVER OIL.—When the advertisement of Mr. Fougere was given to this Journal, it was agreed that, at some time during the year, a fair statement should be made regarding the virtues of the oil manufactured by him. The statement is accordingly published, not as a careless and idle eulogy, but as the result of observation and testimony.

Both in this State and in Virginia private practitioners have been questioned in regard to their experience with this preparation, and the testimony has, without exception, been extremely favorable. The general belief is that the oil is equal to any that is made, and that the blending, pharmaceutically, of iodine and bromine with it, produces more satisfactory results than where good oil and some preparation of iodine are given separately. The out-door department of Bellevue Hospital has, under unfavorable circumstances, experimented largely with this preparation, and with excellent effects. The editor of the Cincinnati *Lancet and Observer* states that he has "used this oil in the dispensary of the Miami Medical College, and in private practice, with great satisfaction. The addition of iodine and bromine evidently increases the efficiency of the original oil."

All the testimony received has been equally satisfactory, and it is believed that this oil can, with safety and justice, be recommended to the profession.

One of the best articles of Iron by Hydrogen we have ever seen is that manufactured by L. Martin & Co., of Philadelphia and New York, samples of which they have kindly sent us, and which we understand has heretofore been highly recommended by the American Pharmaceutical Association, the several Colleges of Pharmacy, &c.

Their article will stand the tests given by our correspondent on page 2.

As a guarantee of the real value of COMSTOCK'S RATIONAL FOOD FOR INFANTS AND INVALIDS, we have only to refer to many of the leading physicians in this city and elsewhere, who are daily prescribing it in their practice. There have been various preparations introduced for a similar purpose, but we believe that none so perfectly resemble the ingredients of human milk as this does. The preparation is based on the research of Baron Liebig, but instead of the chemical mixture devised by him, the constituents of human milk are arrived at in a pure preparation of the heart of wheat and barley, by a precise proportion of those grains, and a precise adjustment of dry heat, eliminating the elements of acidity, and without any admixture of chemicals.

OUR RATES OF ADVERTISING.

	Once.	Twice.	Three times.	Four times.
One column.....	\$40 00	\$60 00	\$80 00	\$100 00
Half ".....	25 00	37 50	50 00	62 50
One-quarter column..	15 00	22 50	30 00	37 50
One-eighth ".....	8 35	13 00	18 00	22 50
One-sixteenth ".....	5 00	7 50	10 00	12 50

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IMPORTERS OF ENGLISH, FRENCH, AND GERMAN
Druggists' Sundries & Fancy Goods,
90 Beekman Street, New York.

ESTABLISHED 1828.

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WHOLESALE DRUG AND CHEMICAL WAREHOUSE,
737 MARKET ST., PHILADELPHIA.
Foreign & American Drugs, Medicines,
Chemicals, &c., &c.

All the celebrated Preparations originally introduced by GEO. W. CARPENTER are prepared by us. Among which are
CARPENTER'S Comp. Fld. Ex. of SARSAPARILLA,
CARPENTER'S Comp. Fld. Ex. of BUCHU.

EMPIRE CHEMICAL LABORATORY

OF NEW YORK CITY,

HART & DAY, Proprietors,

No. 221 EAST 26TH STREET, (near Third Ave.,

Concentrated Alcoholic Fluid Extracts, Concentrated
Powders,

All fine Pharmaceutical preparations of the Dispensatories and others manufactured to order, and guaranteed reliable and uniform. This establishment was opened in view of the existing demand for RELIABLE and UNIFORM preparations, at moderate prices, and is conducted under the direct supervision of Dr. JAS. DAY, graduate of Apothecaries' Hall, London, and a Pharmacist of many years' experience.

We present to the profession a list of fluid extracts—a given amount of any one shall, under the same conditions, produce a certain action, and one fluid drachm shall invariably produce the full action of one drachm of the crude material. They are prepared by no concealed process, are not concentrated decoctions, preserved with sugar or alcohol, but in every case the menstruum best suited for the solution of the active matter of the agent is used cold, and by a skilful application of the laws of percolation, the whole of the active matter is obtained in a small bulk.

It must be evident to the thinking Physician that a fluid extract, simply representing pound for pound, cannot be UNIFORM unless every specimen of crude material would yield the same amount of active principle. This is seldom the case.

Special Preparations.

Rosin Weed (*Silphium Gummiiferum*)—Said to be a specific in Asthma, and highly valuable in lung affections generally.

Agrimony (*Agrimonia Eupatorioides*)—A valuable diuretic and specific in Dropsy, and combined with Gelsemium, &c., in Gonorrhoea.

Garden Marygold (*Calendula Officinalis*)—Applied to recent wounds, or used as a dressing after surgical operations, prevents suppuration and induces healing by first intention.

Stone Root (*Collinsonia Canadensis*)—Valuable in the treatment of Cardiac affections, and as an arterial sedative in pneumonia and kindred diseases, especially when veratrum disagrees.

Compound Stillingia Pill.

Full information given free on application, with price list, &c. All orders from country Physicians for Drugs, Chemicals, Books, Instruments, &c., will be purchased of the finest quality, and forwarded at market rates.

Address

HART & DAY,
EMPIRE CHEMICAL LABORATORY,
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Vaccine Virus,
From Healthy White Children,

CAREFULLY SELECTED WITH REGARD TO PURITY
AND EFFICIENCY.

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Medical Publishers and Booksellers,
No. 25 South Sixth Street, Philadelphia.

COMPLETE CLASSIFIED CATALOGUES of all Medical Works published in the United States, with the prices annexed, furnished FREE of Charge, by Mail or otherwise, upon application being made to them.

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Druggists' Sundries, Toilet Articles
AND

RUBBER GOODS,

AGENTS FOR

YARDLEY & CO., London, England,

MANUFACTURERS OF

FINE TOILET SOAPS,

Sunflower, Honey, Glycerine and Brown Windsor,
Oatmeal, Elderflower, Turtle Oil, &c.,

Which are superior to any Soaps offered in this market.

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WHOLESALE DRUGGISTS,
CHEMISTS AND IMPORTERS,
MANUFACTURERS OF

Sugar-Coated Pills and Granules,

CHARLES BULLOCK,
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SYLVESTER J. BAKER.

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ARTIFICIAL LIMBS

AND

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REPORT SUBMITTED BY THE INTERNATIONAL JURY TO THE
UNITED STATES GOVERNMENT:

"The Artificial Limbs exhibited by Dr. Hudson, of New York City, United States, are in execution unquestionably the most remarkable in the Exposition."

AWARDS by the Imperial Commission to the Artificial Limbs of
Dr. Hudson:

THE GRAND PRIZE MEDAL AND DIPLOMA,
(Only ones received for Artificial Limbs.)
And by the Société des Secours aux blessés Militaires,
A SILVER MEDAL AND DIPLOMA.

E. D. HUDSON, M. D.,
696 Broadway, NEW YORK.

SHOW CARDS,

Finished with a Surface like Glass, and Mounted
and Framed by
CHROMO-FULGENT PRINT CO.,

122 Liberty St., NEW YORK.
N. B.—Process Patented.

[ESTABLISHED 1830.]

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The Great Blood Purifier for Horses.
NIXON'S BLOOD POWDER,

Price, 50 Cents per Pound,

Should be bought by every Farmer or owner of Horses.

Warranted to be a pure MEDICINAL Preparation. A pure remedy for Yellow Water, Distemper, Blind Staggers or Vertigo, Torpid Liver, and Diseases arising from bad blood. It is eminently a Blood Medicine and Liver Stimulant.

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Surgical and Orthopedical Instruments,
Apparatus for Local Anæsthesia and
for Atomization of Liquids,

Laryngoscopes, Ophthalmoscopes, Hypodermic Syringes, Hip-Joint Splints, Skeletons, Trusses, Elastic Stockings.

The latest improvements and new inventions always on
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B. KEITH & CO.,

MANUFACTURERS OF

PURE CONCENTRATED MEDICINES,
Concentrated Tinctures, &c.

Our list embraces many preparations from Crude materials, of recognized official medicinal value. Others, though comparatively new to the profession, are fast gaining confidence in their remedial powers.

Each preparation represents the full therapeutic virtues of the crude substance from which it is derived.

They are *definite* in constitution and therapeutic power, *uniform* in medicinal strength, *reliable* in clinical practice, and *not liable* to vary, change, or deteriorate by age.

We prepare no lacinated articles, nor triturations with foreign substances of any kind.

They are put up in bottles of one ounce, avoirdupois, and securely sealed, to protect them from the action of the atmosphere.

CONCENTRATED TINCTURES.

These tinctures are among the greatest improvements in modern pharmacy, and embrace the peculiar features for which our preparations have become so celebrated. They combine the essential qualities of definiteness, uniformity and reliability. *The various proximate active principles are isolated singly, divested of all non-medicinal admixture, carefully estimated, and re-dissolved in alcohol in exact proportions.* Hence they resemble a definite solution of Morphia, Quinia, or any other definite vegetable alkaloid, and invariably represent a uniform amount of therapeutic power. They are concentrated definite solutions of the entire medicinal constituents of the plants from which they are severally derived.

The above are put up in 2 oz. and 1 pound bottles. Price List and Manual, descriptive of above, sent on application. A liberal discount to the trade.

B. KEITH & CO.,(P. O. Box, 1759.) **41 Liberty Street, N. Y.****COLD EXPRESSED FLUID EXTRACTS,**

MADE BY

N. SPENCER THOMAS' PROCESS,

(Patented January 31st, 1865.)

MANUFACTURED BY

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120 Exchange St., Philadelphia.

WHEELER, PATTERSON & CO.,

160 WILLIAM STREET, Agents in New York.

Sugar-coated Pills, Cerates, Ointments, Spread Plasters,
Extracts, Syrups, &c., all made from best material,
and by careful manipulation.

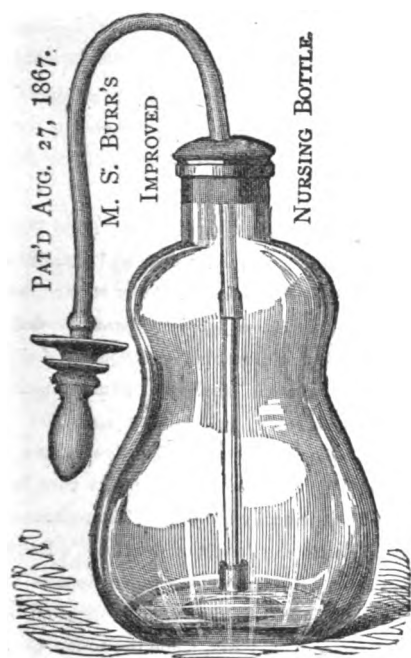
The Fluid Extracts made by Cold Expression are of the strength ordered by the United States Pharmacopoeia, and in all cases contain all the active properties of the best selected drugs. *Heat, evaporation, and prolonged contact with the air, are avoided most perfectly.*

Parties ordering them can rely upon their being uniform in strength.

For all purposes a drop represents a grain of the crude drug, and, not having been injured by heat or evaporation, the physician can get all the effect desired. They are now used with marked approval by many of our most eminent physicians, and as yet no one using them has offered one word in objection.

Price List and Pamphlets, giving doses &c., sent by mail on application.

BURR'S Improved Nursing Bottle.



The most Perfect and Convenient Nursing Bottle in the World,

COMBINING LAFORME'S PATENT of 1859. Re-issued Jan. 14, 1868, and BURR'S PATENT of Aug. 27, 1867.

This Bottle possesses all the advantages of LAFORME'S Patent, so universally admitted, to which are now added "BURR'S Improvements," consisting in part of a combined MOUTH-GUARD and NIPPLE and TUBE-CONNECTOR, composed of ONE piece of Boxwood, conveniently adapted to the use of TWO SIZES of NIPPLES, when required. It is made of the very best material, is free from all metallic substances, finished in the most reliable manner, and is pronounced by competent judges to be the VERY BEST Nursing Bottle ever invented.

The public are cautioned against any imitations or infringements of the above patents.

MILO S. BURR, Patentee and Proprietor.

Packed in a neat box, with a nice silvered wire brush for cleaning the tubes and mouth-guard; also, an EXTRA NIPPLE of LARGER size, fitting on the large shoulder of the mouth-guard, when preferred to the small one.

We shall keep the trade supplied with everything pertaining to the Nursing Bottle, so that any part may be obtained separately, when required.

See that the words "BURR'S PATENT NURSING BOTTLE" are blown in the glass.

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STAPHISAGRIA,	GELSEMINUM (Green Root),
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PARKER'S CORDIAL CONDITION POWDER



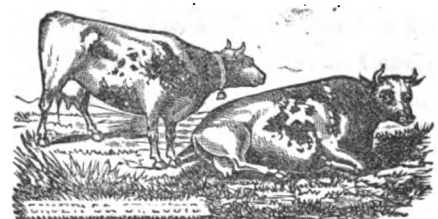
The very best medicine in use for
HORSES, CATTLE, MULES & SHEEP.

This powder is prepared from the recipe of an old English Farrier, is now, and has been for years used throughout England by stock raisers, not alone for its curative, but also its fattening properties. For the following diseases, it will invariably be found a safe, certain and speedy cure:

Fevers of all kinds, Distemper, Founder, Coughs, Loss of Appetite, Hide Bound, Yellow Water, as also all diseases arising from a disordered Stomach, or an impure state of the Blood.

PARKER'S CORDIAL CONDITION POWDER,

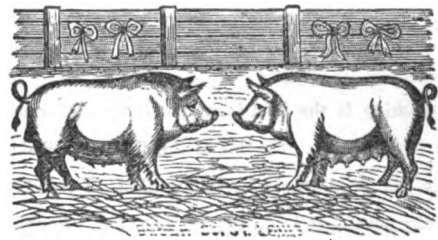
As its name indicates, is a gentle stimulant. Unlike the many articles sold throughout the country for the diseases of Horses and Cattle, this preparation is entirely of vegetable origin—no minerals enter into its composition. Being composed entirely of aromatic seeds, herbs, roots and barks, it may be used with full confidence as to its entire safety, certainty, and mildness of operation. It cleanses the Blood, loosens the Hide, gives to the Skin a smooth and glossy appearance, removes all bad humors, and by its strengthening, life-giving properties, infuses into the debilitated, broken down animal, action and spirit, and restores to him all his natural grace and beauty.



Cows require not only careful attention, but abundance of nutritive food. The testimony of various farmers and dairy men, attest the fact that by the judicious use of

Parker's Cordial Condition Powder.

the flow of milk is not only greatly increased, but the quality vastly improved, as by the use of this powder, all tendency to fever, all gross humors and impurities of the blood, are at once removed.



Breeders and fatteners of Swine will rejoice to know that a prompt remedy for the various maladies, to which these animals are subject is found in

Parker's Cordial Condition Powder.

For Coughs, Fevers, inflammation of the Lungs, Measles, Mange, Kidney Worm, &c. &c., this medicine acts like a charm. Hog Cholera will be avoided by occasional doses of this powder—it is a sure preventative. One paper added to a barrel of Swill and given freely to Hogs, will speedily remove these oft fatal diseases.

Manufactured by

WM. B. PARKER,

St. Louis, Mo.

RICHARDSON & Co., General Agents,

704 & 706 Main Street,

St. Louis.

BREAST MILK



FOR INFANTS.

ITS CONSTITUENTS, THE RICHEST PART OF the berry of Wheat and Barley Malt, being scientifically prepared ready for use, this food by analysis is the same in its chemical elements as HEALTHY BREAST MILK, and is the easiest of digestion and assimilation of all nourishments for Children, Invalids and Dyspeptics. It has been tried and is recommended and prescribed by the most eminent Physicians of New York.

Below are the names of some of the Physicians to whom it was sent to test. Some of them use it in their own families, and nearly all of them have recommended and sent persons for it, and I would, if necessary, give the names of many other Physicians who send for it.

JAMES R. WOOD,	JAMES L. LITTLE,
WILLARD PARKER,	G. A. SABINE,
H. B. SANDS,	JOHN H. GRISCOM,
E. R. FRASLEE,	GEO. T. ELLIOTT,
J. M. CARNOCHAN,	WM. H. DRAPER,
WM. A. HAMMOND,	AUSTIN FLINT,
J. J. CRANE,	LEWIS A. SAYRE,
A. REISIG,	C. R. AGNEW,
R. REISIG,	JOHN F. GRAY,
J. G. BALDWIN,	ROBERT STEWART,
E. WEST,	W. T. OKIE,
Drs. RANNEY,	P. C. COLE,
C. E. BLUMENTHAL,	WM. EAGER.

In preparing it the heat is regulated by a Thermometer—if too much heat the life of the flour is killed; if too little the Food would be indigestible. I transform the starchy substance into dextrine of sugar. Cooks or nurses cannot prepare from Liebig's formula. It is equally good for invalids and dyspeptics, and I have the names of several invalid Physicians who are living upon my Food. Respectfully,

GEO. WELLS COMSTOCK,
179 FULTON STREET, N. Y.

BEHOLD WHAT GOD HATH WROUGHT IN THE KERNEL OF WHEAT:

It contains dextrine of sugar (starch), being the fuel which, under the influence of oxygen, is consumed and produces animal heat. It is oxidized, and the ashes

rejected through the respiratory organs. The heat imparted by this combustion is necessary to the proper fulfillment of the functions of the body, of which digestion and assimilation are the most important. The digestive apparatus receives the gluten and starch of the grain; the latter is pushed forward to be burned, the former enters the circulation and out of its contained iron, potash, soda, magnesia, lime, nitrogen, &c., are manufactured all the important tissues and organs of the body. All of the iron is retained in the blood, and much of the soda and phosphoric acid; the lime goes to the bones, and the magnesia abruptly leaves the body, as it seems to be very plainly told that it is not wanted. Such, in brief, are the uses which the organic and inorganic constituents of a kernel of wheat subserve in the chemistry of animal life. And should we not appropriate them to our own use, as the most carefully adjusted of all materials designed for human aliment? In COMSTOCK'S RATIONAL FOOD are combined the chemical offices which the substances found in a kernel of wheat perform in the animal economy, and are made of wonderful nutritive and restorative value to the feeble infant, invalid or dyspeptic.

The following letter from DR. HELMUTH, of St. Louis, who stands at the head of his profession, is one of very many similar letters from Physicians and others:

ST. LOUIS, MO., June 12, 1867.

MR. GEO. WELLS COMSTOCK,

DEAR SIR:—I have used the Food which you manufacture for Infants, Invalids and Dyspeptics, and cheerfully recommend it as the BEST ARTICLE NOW IN USE.

Very respectfully,

WM. TOD HELMUTH, M. D.

Dr. James R. Wood, Dr. James R. Little, and other eminent Physicians have used it in their own families and I am permitted to refer to many eminent Physicians who prescribe it.

Sold by druggists.

G. W. COMSTOCK,

176 Fulton street, near Broadway,

New York.

ALL PHYSICIANS,

Of every school, agree in two simple doctrines:

1st. That nearly all chronic diseases originate from disorder in the digestive organs (the stomach, intestines, liver, &c.), and a consequent imperfect nourishment.

2d. That the temporary and illusory relief obtained by pills, purgatives and injections, is purchased at the high price of an aggravation and perpetuation of the diseases they are directed against.

In Dr. Abernethy's excellent work on Local Diseases, he says: "Disorders in the stomach and intestines produce in the *Nervous System* a diminution of the functions of the brain so as to cause apoplexy, paralysis, delirium, stupidity, or the opposite state of irritation and pain, and in the *muscular system* weakness, tremors, palsy, or spasms and convulsions, in children especially." By correcting the disorders of the digestive organs, local diseases, which have baffled all attempts at cure by local means, have been speedily removed. The natural soothing, correcting action and effect of COMSTOCK'S RATIONAL FOOD upon these delicate organs, remove diseases resulting from constitutional weakness, or brought on by neglect or the excesses of years, while the action of medicines produce a greater degree of weakness, and consequently aggravate and perpetuate disease.

COMSTOCK'S RATIONAL FOOD is a Medico-Scientific Food, analogous to breast milk. Either to be given in conjunction with the breast, as a relief to the mother in case of defective lactation, or for the sole rearing of infants by hand, whereby hereditary taint will be prevented, and better structural and physical development of the babe attained.

When prepared according to the directions, it produces a food for infants similar in appearance and taste, and in chemical composition, to healthy human breast milk. It may be given alternately with the mother's milk, or, when circumstances require, it may be used as the sole food until the child is weaned, or has arrived at an age requiring a stronger diet.

This article has borne the test of trial, and we have the testimony of our most experienced and discriminating physicians that it agrees in most cases with infants much better than any other articles yet introduced.

Comstock's Rational Food for Invalids and Infants.

We take pleasure in recommending the above very valuable preparation. It is composed of malt and wheaten flour, scientifically prepared and ready for use, similar to Professor Liebig's celebrated improved formula. It is a most excellent substitute for breast milk for young children, as well as a good dietetic preparation for invalids and dyspeptics, being readily digested, and affording an agreeable and useful nutriment for weak and feeble persons who, from prostration by disease, are unable to retain more solid food.—*St. Louis Medical Reporter*, July 1.

CODMAN & SHURTLEFF'S

Apparatus for Local Anæsthesia and Atomization of Liquids.

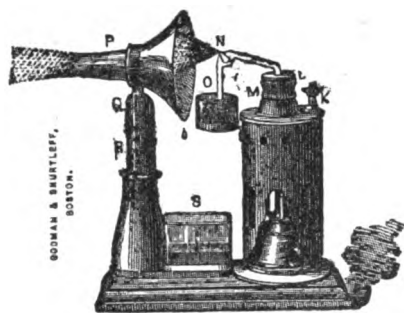


FIG. 1.

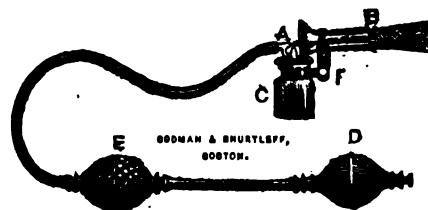


FIG. 5.

WILL BE SENT BY MAIL (POST-PAID) ON APPLICATION,

A PAMPHLET, containing two articles, by distinguished foreign authority, on
"INHALATION OF ATOMIZED LIQUIDS,"

WITH FORMULÆ OF THOSE SUCCESSFULLY EMPLOYED.

An article by Dr. J. L. W. THUDICHUM, M. R. C. P., on

"A NEW MODE OF TREATING DISEASES OF THE NASAL CAVITY,"

WITH HIS FORMULÆ.

An illustrated description of the *best apparatus* for the above purposes, and for producing Local Anæsthesia by Atomization with Ether, by the method of Dr. RICHARDSON, of London: or with Rìgolene, as described by Dr. HENRY J. BIGELOW, in the *Boston Medical and Surgical Journal* of April 19, 1866. The following is an extract from a note from Dr. Bigelow—

"I have thus far found nothing better for freezing with Rìgolene than the tubes made by you after the pattern I gave you, and which I still use with your other apparatus."

Dr. J. MASON WARREN says—

"Your apparatus for Atomization of Liquids seems to have been carefully made, and I think it an efficient one where required for treatment of diseases of the Throat and Lungs. The apparatus for Local Anæsthesia, which you made for me, answers the purpose perfectly."

PRICES.

Steam Apparatus (see fig. 1.) complete, with two glass Atomizing Tubes and Face Shield, packed for transportation,.....	\$12 00
Shurtleff's Atomizing Apparatus, (patented March 24, 1868—see fig. 5.) with two glass tubes for Inhalation, packed,.....	4 50
Hand Ball Apparatus, with two Glass Atomizing Tubes, for Inhalation, packed.....	4 00
Silver Plated Tubes, for Local Anæsthesia, each.....	2 00
Rìgolene, for Local Anæsthesia, best quality, packed.....	1 00
Nasal Douche, or Apparatus of Dr. THUDICHUM for Treating Diseases of the Nasal Cavity, packed.....	2 50 to 3 50

[For complete illustrated price-list of the above see pamphlet.]

Our Atomizing Apparatus is made with the utmost care, with a view to its complete efficiency, convenience and durability, and every one is warranted. The Steam Apparatus has been adopted into the "Supply Table," as the standard for the United States Army. A Gold Medal has lately been awarded us by the Middlesex Mechanics' Association, for Atomizing and Surgical Instruments, as will be seen from the following report, signed by a leading New England Surgeon and Physician:

"1503. Codman & Shurtleff, Boston, Mass. One Case Surgical Instruments and Atomizers.

The Committee have no hesitation in awarding for this superb exhibition the highest premium. * * * * * The various other instruments for Inhalation of Atomized Liquids, and for Local Anæsthesia, were all apparently faultless, both in design and workmanship. The exhibitors are regarded as more especially deserving of the highest token of merit for having produced nothing except of their own manufacture.

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(Signed),

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The parts of each kind being interchangeable, Physicians at a distance can be sure that in ordering tubes, &c., they will be adapted to the apparatus previously purchased.

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This is a French preparation for the cure of Consumption and kindred diseases, and has been used in England and on the Continent with marked success for two years past, and lately introduced into the United States.

It is positively free from offensive taste or smell, and, when mixed with water, according to direction, presents the appearance of rich milk.

No chemical agent is used in the preparation, and no process which affects, in the least degree, the peculiar properties of the oil.

Being free from the conditions which make the raw oil so repugnant, it is ready digested and assimilated so that the smaller quantity taken is more efficacious than the dose of raw oil usually prescribed.

It is an alimentary as well as a medicinal substance, and therefore of great benefit to aged and feeble persons, debilitated from the effects of disease or want of nourishment from impaired digestion.

It is also valuable for children who inherit a tendency to Consumption, preventing the formation of tuberculous matter in the lungs.

Persons using the CREAM are not to expect sudden and startling experiences of cure by the use of a single bottle. The results are rather gradual but effective, in giving permanent relief by persevering use.

Three Prize Medals have been awarded to Mr. Joly for this Preparation at the French Exhibitions.

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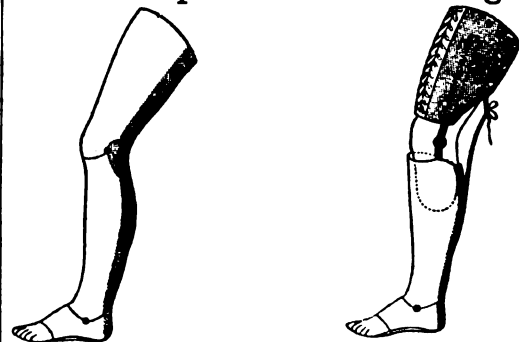
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This invention stands approved by every Surgeon who has examined it, many of whom had given testimonials for others previous to the advent of this before the public.

It contains the requisite combination for the best, is less complicated, lighter, stronger, more durable, and more perfectly adapted to the wants and comforts of the wearer than any other leg.

It has attained a perfection in its movement which enables the wearer to walk, not only with ease, but in a graceful and natural manner.

Mr. Clement has had a practical experience of twenty years in the business, and during that time became acquainted with the merits and faults of every kind of artificial limb, and now has combined the best principles of those that had any with new improvements of his own.

The models which received the "Great Prize Medal" at the World's Exhibition in London, and most of the others which have been exhibited before scientific bodies in this country, were made by Mr. Clement.

This limb is pronounced by many of the most eminent surgeons as the "best" now made, and is endorsed by the Surgeon-General U. S. Army, and adopted for the Army and Navy.

It is approved and recommended by the entire Faculty of Jefferson Medical College, and is the only artificial limb in that Institution.

The attention of Surgeons, Physicians, and all persons interested, is most respectfully solicited.

Pamphlets containing information and references concerning this leg sent free to applicants, by mail or otherwise.

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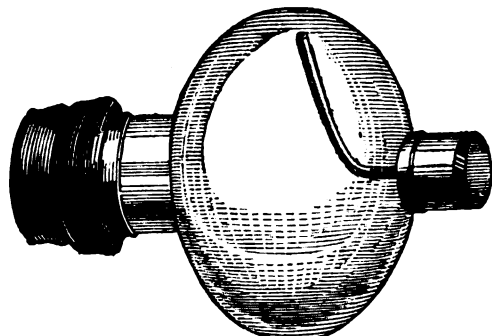
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The Subscriber has a letter of recommendation from S. D. GROSS, M.D., Professor of Surgery in Jefferson Medical College, Philadelphia, bearing a later date than any given by him to any other manufacturer.

[PATENTED NOV. 19TH, 1867, AND JUNE 9TH, 1868.]

FRY'S IMPROVED BREAST PUMP AND CUPPING CUPS.



BREAST PUMP.

Their simplicity of construction is such that they need no second person to apply them, and as none but the mother who needs the use of the Breast Pump can so tell the amount of pressure that can be borne, it is essentially necessary to be personally able to use it.

Their effectiveness is such that no similar instrument has yet been made to do their work so perfectly, and (in the Breast Pump) so near an approach to nature, with same amount of ease and comfort, especially with the additional improvement, patented June 9th, 1868, wherein, by the adaptation of a Rubber Breast Shield, the nipple is entirely relieved from pressure; thus, on even sore and tender nipples they can be used without occasioning pain.

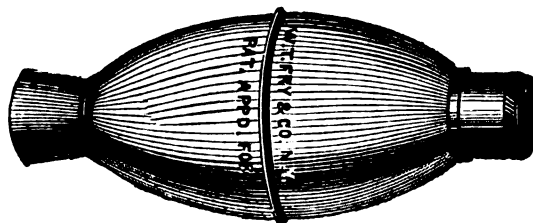
There is no heavy exhausting apparatus to tire the patient in its support, to become useless the first time accidentally wetted—nor Rubber Tube, which by lying away for a few months, becomes hard and break, just as it is needed for use.

The application is so easy that the most inexperienced person can immediately understand and apply them. As the Exhausting Bulb can be attached and detached at pleasure, the operator does not become fatigued in using it.

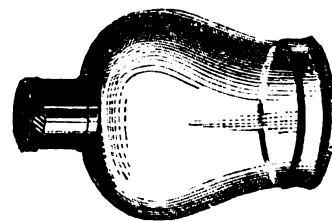
The peculiar construction of valves used in connection with the elastic mouth of the Exhausting Bulb, renders it perfectly easy to put on any number of Cups at the same time, and by the occasional application of the bulb to the valve on top, to keep them on any length of time—and can be used either as wet or dry Cups.

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Its peculiarities are, the contents are in contact only with glass and cork, and cannot become affected by metal at mouth of bottle, injuring the liquid, and, in time, rendering it poisonous.



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Aloes et Assofet.	U. S. P.	\$0 40	\$1 75	Ferri et Strych. Cit.	{ Strych. Cit. 1-50 gr. Ferri. Cit. 1 gr. }	\$0 75	3 50
Aloes et Ferri.	{ Pulv. Aloes Socot. ½ gr. " Zingib. Jam. 1 gr. Ferri Sul. Exsic. 1 gr. Ext. Conil. ½ gr. }	40	1 75	Gambogiae Comp.	U. S. P.	40	1 75
Aloes et Mastich.	(See Pil. Stomachica).	50	2 25	Gonorrhœa.	{ Pulv. Cubebe. 2 grs. Bals. Copaib. Solid. 1 gr. Ferri Sulph. Exsic. ½ gr. Terebinth. Venet. 1½ grs. }	60	2 75
Aloes et Myrrh.		50	2 25	Hepatica.	{ Pil. Hydrarg. 3 grs. Ext. Coloc. Comp. 1 gr. Ext. Hyosciam. 1 gr. }	80	3 75
Ammon. Bromid.	1 gr.	75	3 50	Hooper. (Female Pills)	2½ grs. U. S. Dispens.	40	1 75
Anderson's Scots.	(See U. S. Dispensatory).	40	1 75	Hydrargyri.	U. S. P. 3 grs.	40	1 75
Anti-bilious (Veg.)	{ Pulv. Ext. Coloc. C. 2½ gr. Podophyllin. 1½ gr. }	70	3 25	"	Comp. { Mass. Hydrarg. 1 gr. " Pulv. Opil. ½ gr. " Ipecac. ¼ gr. }	75	3 50
Anti-Chill.	{ Chinoidin. 1 gr. Ferri Ferrocyan. 2 grs. Ol. Piper. Nig. 1 gr. Arsenic. 1-20 gr. }	1 25	6 00	"	{ Iod. et Opil. { Hydrarg. Iodid. 1 gr. (Richards.) { Pulv. Opil. ½ gr. }	75	3 50
Anthelmintic.		1 00	4 75	Iodoform et Ferri.	{ Ferrum per Hydro. 1 gr. Iodoform. 1 gr. }	3 25	16 00
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Aperient.		40	1 75	Leptand. Comp.	{ Leptandrin. 1 gr. Irisin. ¼ gr. Podophyllin. ½ gr. }	1 00	4 75
Assafoetida, 2 grs.	{ Assafoetida. 2 grs. Ferri Sulph. Exsic. 1 gr. Assafoetida. 1 gr. Pulv. Rhei. 1 gr. (Ferrum per Hydrog. 1 gr. }	40	1 75	Lupulin. 3 grs.		40	1 75
"	Comp.	40	1 75	Opil. U. S. P. 1 gr.	{ Pulv. Opil. 1 gr. Camphor. 2 grs. }	80	3 75
" et Rhei.		75	3 50	Opil et Camphor.	{ Camphor. 2 grs. Acid. Tannic. 2 grs. }	90	4 25
Bismuth. Subnit.	3 gr.	75	3 50	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Camphor. 1 gr. Acid. Tannic. 2 grs. }	90	4 25
Bismuth et Ignatia.		1 50	7 25	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Calomel, ½ to 5 grs.		40	1 75	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
"	5 grs.	50	2 25	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
" et Opil.	{ Calomel. 2 grs. Opium. 1 gr. Calomel. ½ gr. Ext. Rhei. ½ gr. " Coloc. C. 1-6 gr. Hyosciam. 1-6 gr. }	85	4 00	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
" et Rhei.		75	3 50	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Cathartic Comp.	{ Podophyllin Ext. Colocynth. Virgin Scammony. Aloes Soap & Cardamon (Pulv. Aloes Soc. " Rhei. Opt. Gum Mastich. }	70	3 25	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Cathart. Vegetable.		75	3 25	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Chapman's Dinner Pills.	{ Pulv. Aloes Soc. " Rhei. Opt. Gum Mastich. }	60	2 75	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Cerul Oxalat. 1 gr.	{ Chinoidin. 2 grs. Ferri Sulph. Exsic. 1 gr. Piperine. ½ gr. }	1 00	4 75	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Chinoidin Comp.		1 00	4 75	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Chinchon. Sulph.	½ gr.	75	3 50	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Cook's 3 gr.	{ Pulv. Aloes Soc. 1 gr. " Rhei. 1 gr. Calomel. ½ gr. Sapon. Hispan. ½ gr. }	50	2 25	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Coloc. Comp. 3 gr. (Ext. Coloc.)	Comp. U. S. P.	80	3 75	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Colocynth. et Hydrag. et Ipecac.		75	3 50	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Copaiba, U. S. P. 3 gr.		50	2 25	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
" et Ext. Cubebe.	{ Pil. Copaiba. 3 gr. Oleo res. Cuc. 1 gr. }	80	3 75	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Diuretic.	{ Sapo Hispan. Pulv. 2 grs. Sodae Carb. Exsic. 2 grs. Ol. Baccæ Junip. 1 drop. }	50	2 25	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Dupuytren.	{ Pulv. Guaiac. 3 grs. Hydg. Chlor. Coros. 1 1-10 grs. Pulv. Opil. ½ gr. }	50	2 25	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Ext. Valerian. 3 grs.		65	3 00	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Emmenagogue.	{ Ergotine. 2 grs. Ext. Hellebore Nig. 1 gr. Socot. Aloes. 1 gr. Ferri Sulph. 1 gr. Ol. Sabinæ. ½ gr. (Ox-Gall. 2 grs. Pow'd Jamaica Ginger. 1 gr. }	1 40	6 75	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Fel. Bovinum.		50	2 25	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Ferri (Quevenne's) 1 gr.		50	2 25	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Ferri (Quevenne's) 2 grs.		75	3 50	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Ferri Carb (Vallet's) U. S. P. 3 grs.		40	1 75	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Ferri Citrat. 2 grs.		50	2 25	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Ferri Comp. U. S. P.		40	1 75	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Ferri Iodid. 1 gr.		65	3 00	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Ferri Lactat. 1 gr.		50	2 25	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Ferri Pyrophosph. 1 gr.		40	1 75	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Ferri Sulph. Exsiccat. 2 gr.		40	1 75	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Ferri Valer. 1 gr.		1 00	4 75	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Ferri et Quass.	{ Fer. per Hyrogen. 1½ gr. Ext. Quassia. 1 gr. " Nux Vom. ½ gr. Pulv. Saponis. ½ gr. }	75	3 50	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Ferri et Quin. Cit. 1 gr.		75	3 50	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Ferri et Strychnia.	{ Strychnia. 1-60 gr. Ferr. pr Hydr. (Quevenne's) 2 grs. }	1 40	6 75	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75
Gent. Comp.	{ Ext. Gen. ½ gr. Aloe Socot. ½ gr. Pulv. Rhei. 1½ grs. Ol Carui. 1-6 gr. }	40	1 75	Opil et Camph. et Tannin.	{ Pulv. Opil. ½ gr. Plumb. Acet. 1½ grs. }	80	3 75

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Acid Arsenious.	1-20 and 150 grs.	40	1 75
Aconitia.	1-60 gr.	75	3 50
Atropia.	1-60 gr.	75	3 50
Corrosive Sublimate.	1-12 and 1-20 gr.	40	1 75
Digitalin.	1-60 gr.	75	3 50
Elaterium.	(Clutterbuck's.) 1-10 gr.	95	4 50
Extract Belladonna (English).	¼ gr.	40	1 75
" Cannabis Indica.	¼ gr.	60	2 75
" Hyosciamus (English).	½ gr.	40	1 75
" Nux Vomica.	¼ gr.	40	1 75
Leptandrin.	¼ gr.	40	1 75
"	½ gr.	40	2 25
Mercury Iodide.	¼ gr.	40	1 75
" Red.	1-16 gr.	40	1 75
Morphia Acet.	¼ gr.	75	3 50
" Sulphate.	1-10 gr.	65	2 75
"	½ gr.	75	3 50
"	1-6 gr.	99	4 25
"	¼ gr.	1 10	6 25
" Valerianate.	¼ gr.	95	4 75
Podophyllin.	¼ gr.	40	1 75
"	½ gr.	40	1 75
Potass. Permangan. Chryst.	½ gr.	50	2 25
Quinia Valerianate.	½ gr.	50	2 25
Silver Nitrate.	¼ gr.	2 00	9 75
Silver Iodide.	¼ gr.	75	3 50
Strychnia.	1-20, 1-40 and 1-60 gr.	75	3 50
"		40	1 75

Special Receipts made to order when 3,000 Pills are ordered at one time, and estimates made for quantities at the lowest figures.

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NOTES, QUERIES, MEDICAL and CHEMICAL NEWS, FORMULAS, &c.

Black salt has recently been discovered.

Death by electricity is the new form of capital punishment proposed. It is painless and instantaneous.

There has been a few cases of cholera in this city, but not of an epidemic form.

Every druggist should subscribe for the *American Journal of Pharmacy*, published at \$3 a year. Philadelphia.

A bill is before the House of Representatives, in Belgium, which requires that dentists shall possess the degree of Doctor of Medicine and Surgery.

The Pharmacy Bill in England is eliciting various discussions, *pro* and *con*, in the medical and chemical publications of that country.

The propriety and impropriety of renewing prescriptions by druggists is being generally discussed in the medical and chemical publications of this country.

Dr. C. B. Braman, in the *Boston Medical and Surgical Journal*, reports a case of poisoning with Bromide of potassium.

IMPORTANT TO CHEMISTS.—This advertisement appears in a Paris paper: "A young lady of forty-eight, having a moderate income, but possessing a patent for a new invention, wishes to marry a gentleman of sixty-five well versed in chemistry."

A gallon of the Gettysburg spring water contains 46 troy grains of bicarbonate of lithia, 76 of bicarbonate of magnesia, 81 of bicarbonate of lime, 53 of sulphate of lime, and 10 of silica. It was located within the lines of Lee's army, during the battle of Gettysburg, and its medical qualities were discovered by some of the surgeons.

The *France Médicale* says that a banker in Saxony has opened a collection office, in which medical men are invited to send accounts against their patients. The banker takes charge of the bills, &c., and is content with five per cent discount. We advise an enterprising man in each important city in this country to immediately start a similar institution, as he is sure of patronage.

One of the most mysterious cases of poisoning by strychnia recently occurred in this city. A Mr. Spicer, feeling unwell, requested his wife to send the colored man to a near apothecary and procure a seidlitz powder. The powder was taken from a drawer containing other seidlitz powders and handed to him, and immediately taken to the house and given to Mrs. Spicer. According to her testimony she carried it up to her husband's room unsealed, and laid it upon a bureau within his reach. Soon after taking the powder a physician was called, who made every effort to save him, but was unsuccessful, as it has since been estimated that it must have contained nearly 20 grains of strychnia. From the testimony given the coroner's jury bring in a verdict that the strychnia was not in the powder when it was taken from the drug store, and that it was not self-administered, but refrain from expressing, in their opinion, who the guilty party was. We presume they base their opinion that it was not self administered from the great anxiety the patient showed about dying.

HOW TO ASCERTAIN THE HEALTH OF THE LUNGS.—Draw in as much breath as possible, then count, without drawing in any more, till the lungs are exhausted. In consumption the time does not exceed ten, and is frequently less than six seconds. In pleurisy and pneumonia it ranges from nine to four seconds. When the lungs are in a sound condition, the time will range as high as from twenty to thirty-five seconds.

An Improved Formula for Compound Spirits of Lavender.

Lavender flowers.....	3 iv.
Rosemary ".....	3 ij.
Cassia bark.....	3 j.
Nutmegs.....	3 ss.
Red Saunders.....	3 vj.
Cloves.....	3 ij.
Diluted Alcohol.....	cong. j.

Dental Caustic, for Destroying the Nerve of the Tooth.

Extract Conium.....	
Acid Arsenious.....	
Morphia Sulph.....	
Potassa, Carb.....	ss.
Creasotum.....	3 ss.

in Fiat Mass.

Oudin's Anti-Spasmodic Mixture.

Chloroform.....	3 j.
Tincture of Orange Peel.....	3 j.
Oil of Bitter Almonds, 5 grs. dissolved in one ounce of alcohol.....	
Sugar.....	3 x.
Water, q. s. to make 25 oz.	

Dose, one or two wine-glassfuls. Useful in emesis, colic, diarrhoea, hemorrhages, dysentery, amenorrhoea, and as a preventive against cholera.—*Bouchard's Annual Abstract for 1867.*

Mille-Fleur Perfume.

Musk.....	grs. x.
Oil Lavender.....	
" Nuroli.....	ss.
" Bergamot.....	gtts. xx.
" Lemon.....	ss.
" Rose.....	gtts. xl.
" Almonds.....	Ess.
" Clove.....	gtts. v.
" Cinnamon.....	gtts. xx.
Powdered Nutmeg.....	3 ss.
" Vanilla.....	grs. xx.
" Tonka Beans.....	3 j.
" Orris Root.....	3 viij.

Racahout Des Arabes.

A FOOD FOR INVALIDS AND CHILDREN.

Roasted Cocoa.....	3 ss.
Bermuda Arrow Root.....	3 ss.
Rice Flour.....	each..... 3 x.
Powd. Vanilla.....	3 ss.
" White Sugar.....	3 ij.

Two or three tablespoonfuls to be stirred in half a pint of boiling milk.

Artificial Saratoga Spring Water.

Chloride of Sodium.....	3 ij.
Bicarb. Soda.....	3 j.
Sulph. Magnesia.....	grs. xl.
Muriate of Ammonia.....	" xx.
Carbonate of Potash.....	" ij.
Aqueous solution of Iodine.....	3 ij.
Water.....	cong. iij.

Charge with carbonic acid gas from 100 to 110 lbs.

Crew's Spread Mustard Plaster.

The great value of the mustard poultice as a rubefacient, in cases requiring rapid counter-irritation, is universally admitted, but the inconvenience of applying them is often very great, especially when the patient is not in bed. Several attempts have been made to prepare a portable and permanent mustard plaster, of which the "Papier Sinapiée" of M. Rigollet (see page 276 of this journal) is an example. We have also seen a translucent paper called "Cooper's Sinapine Tissue, or mustard paper," which appears to owe its rubefacient power to capicum, and is not entitled to the name of mustard paper, both tasting and smelling of Cayenne pepper. Our attention has been directed to the subject by an examination of the mustard paper of Benj. J. Crew, who has been for some

time engaged in working out the problem of an efficient and portable mustard plaster. This he has succeeded in doing perfectly. The mustard in substance forming a uniform layer on the paper, sufficiently pliable, adheres firmly, and, when dipped in water, is ready for application in half a minute, adhering sufficiently to be easily retained in position with a bandage. Applied to the arm, its action was sensibly manifested in three minutes, with the usual symptoms of good mustard. As this preparation retains its power unaffected by age, so long as it is kept dry, it will be found exceedingly valuable in all cases where a rubefacient is indicated, and convenient for travellers and country physicians, as well as in families.—*American Journal of Pharmacy, May, 1868.*

Lighting the Street Lamps by Electricity.

The street gas-lighting machines (by electricity) to be seen at No. 7 Duane street, are really wonderful, and we see no reason why they should not be generally adopted by all the cities using gas for lighting, on the points of economy and convenience. It is a simple, small machine, placed in each lamp-post and connected by insulated wires with a central point, where the operator can, by simply starting the clock-work attached to the batteries, at once open the clocks in each lamp and light up a whole city in the twinkling of an eye, or put out the lights at his pleasure. We notice, by our Mayor's late inaugural address, that 38,000 dollars is the estimate for labor and lighting of the city street lights. The labor and the amount of gas that would be saved in the time allowed for lighting and putting out, and the amount that is now used on bright moonlight nights, constitute an aggregate, and no doubt would more than pay for the whole expense of introducing the improvement for the first year. The experiments at Duane street are worth witnessing by all.—*N. Y. Times.*

TO PRESERVE MEAT.—Meat of any kind may be preserved in any temperature, after it has been soaked for ten minutes in a solution made of the following ingredients, well mixed: one pint of common salt dissolved in four gallons of clear cold water, and half a gallon of the bisulphate of calcium solution. This recipe has just been patented in England, and experiments have there shown that meats so prepared will keep for twelve days in a temperature from 80° to 110°, and preserve their odor and flavor unimpaired. By repeating the process, meats may be indefinitely preserved, and if it is desired to keep them for an unusually long time, a little solution of gelatine, or white of an egg, may be added to the wash.—*Jour. App. Chem.*

BAFFINE HAIR DYE.—Permanganate of potash, one drachm; pulv. gum arabic, two drachms; rose water, three ounces. Mix, and apply with a small, clean brush, taking care not to color the skin, as its effect upon the latter is as great as upon the hair. The color produced is a fine chestnut.—*Ibid.*

A NEW HAIR DYE.—Dr. McCall Anderson, in a recent paper, says: "During the treatment, I accidentally discovered what promises to be the most perfect black dye for the hair which has yet been seen. After having used the bichloride lotion for some weeks, I changed it for the lotion of the hyposulphite of soda, and the morning after the first application the hair of the part, which before was bright red, had become nearly black. One or two more applications rendered it jet black, while neither the skin nor the clothing were stained. I saw this patient a couple of weeks later, and there was not the least deterioration of color, although, of course, as the hair grows, the new portions will possess the normal tint. He was by occupation a Turkey-red dyer, and was much interested in the discovery, though rather grieved to find, what medically must be considered one of its greatest advantages, that it did not dye the linen, and was therefore unavailable for his purposes."



**L. MARTIN & CO.,
MANUFACTURING CHEMISTS,**
No. 59 Cedar St. (NEAR POST-OFFICE),
NEW YORK.

The attention of careful dispensers is called to their especially

**PURE ACIDS,
IRON by HYDROGEN,
NITRATE of SILVER,**

FOR PHOTOGRAPHIC AND OTHER PURPOSES.

**SALTS OF BISMUTH,
" " MORPHIA,
" " STRYCHNIA,
ACETIC ACID,**

Equal to Beaufoy's best English, with many other

PURE CHEMICALS,

Prepared with great care, especially for

Medical and Scientific Uses,

And which have met the approval of most of the best
Pharmaceutists.

**RENATUS BACHMANN,
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Pharmaceutist & Chemist,
No. 188 Fulton Street,
Opposite Church St., NEW YORK.

Pharmaceutic Sugar-Coated Pills, Extracts, Tinctures,
Syrups, Ointments, Plasters, Confections,
Pastilles, Medicated Lozenges, &c.

MAKING and SUGAR-COATING PILLS to order.

☞ A Price List sent on application.

In addition to the above, an Agency has been established for the purchase and sale of Drug Stores, and supplying Druggists with Clerks or Assistants, at moderate charges.

**MARK'S PATENT ARTIFICIAL LIMBS,
WITH**



India Rubber Hands and Feet, are recommended by the first surgeons in the country, and all experienced wearers who have used them.

The Highest Premium GOLD and BRONZE MEDALS were awarded them as the BEST at the great Fairs of the American Institute, 1865 and 1867. Army and Navy furnished by Government authority. Illustrated pamphlet sent free.

A. A. MARKS,
No. 575 Broadway, New York City.

**Crew's Patented Prepared Sinapism,
OR SPREAD MUSTARD PLASTER.**

WARRANTED TO PRESERVE UNIMPAIRED ITS STRENGTH IN ANY CLIMATE EQUALLY WITH THE GROUND MUSTARD.

The attention of Physicians, the Drug Trade, and the public generally, is respectfully called to the above specialty, designed to meet a want which is believed to have been long felt among the appliances of the sick room, viz.: an easy and expeditious method of obtaining the remedial effects of mustard, without resorting to the ordinary crude and troublesome mustard poultice, without its attendant discomforts. Put up handsomely in boxes of one doz. each, in three different sizes. Price, 75c., 87c., and \$1 per doz. A liberal Discount to the wholesale trade.

Prepared only by B. J. CREW, 25 North Sixth St., Philadelphia.

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258 West 32d Street, (near 8th Ave.), NEW YORK.
All Orders filled promptly at Lowest Cash Prices.

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Depot: PAINE BROS. & HORNER,
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Quinine, Morphine, Strychnine, Acetic Acid, Bromine
and its Preparations,

AND A GENERAL ASSORTMENT OF

Pure Chemicals.

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MANUFACTURER OF

Chemically Pure Chloroform, Ethers, Spirits of Nitre,
Rochelle Salts, Ammonia, Seidlitz Mixture,
Copperas, Bay Rum, &c., &c.

☞ Special attention is paid to the preparation of all
alcoholic chemicals, thereby insuring strictly pure articles,
free from deleterious fusel oils.

**CHARLES PFIZER & CO.,
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No. 17 Beekman St., N. Y.,

REFINERS of BORAX and CAMPHOR; manufacturers of Iodide
Potash, pure Chloroform, Morphine, Strychnine, Mercurial
Ethers, Pure Acetic Acid, Aqua Ammonia, and a general
assortment of FINE CHEMICALS;
Importers of Quinine, Phosphorus, Glycorine, and fine German
Chemicals.

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facturing rates.

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(LATE WADE AND FORD.)

Instrument Maker to the N. Y. City, Bellevue and N. Y. & Woman's Hospitals,
MANUFACTURES AND IMPORTS

SURGICAL, DENTAL & VETERINARY INSTRUMENTS,
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Stockings for Varicose Veins, Orthopedical Apparatus,
Electric Machines, Ear Trumpets, Auricles, etc.,

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TEENTH ST., one door West of Broadway,

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MORTARS,**

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WEATHER VANES, &c.

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CREW'S COMPOUND SPICE PLASTER,

Composed wholly of the Pure Ground Spices in substance, and war-
ranted to preserve its strength unimpaired in any climate
equally with the Spices themselves.

This Plaster is composed of the following spices, in equal parts,
viz., Cinnamon, Cloves, Ginger and Capsicum; is spread by
machinery, upon paper, and is designed to furnish a convenient
and complete substitute for the old fashioned and valuable spice
plaster, so useful in cholera infantum, cholera morbus, and
bowel complaints generally.

PREPARED ONLY BY

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No. 25 North Sixth Street, Phila.

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CONSTANTLY ON HAND,

A FULL AND COMPLETE ASSORTMENT,
and made to order when required. Offices fitted up
with bottles and labelled in best style. Glass Labels.
Scales of Troemner's make.

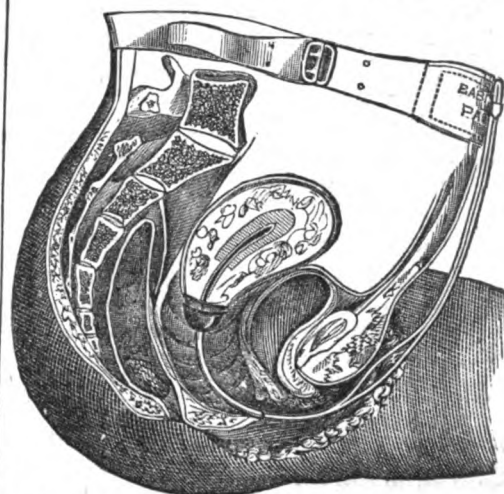
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UTERINE SUPPORTER,**

FOR THE

Radical cure of Prolapsus, Retroversion & Anteversion.



A side view of the Female Pelvis, showing the application of
Dr. BABCOCK'S UTERINE SUPPORTER, holding the Prolapsed
Uterus up in its place without interfering with any other
organ.

Any Physician wishing a sample can have one sent by
express to his address by ordering from the inventor and
patentee (who will furnish one at the actual cost to manu-
facturer as a Specimen Sample). Price \$25 each for
either size—large, medium or small.

LELAND A. BABCOCK,

Freeport, Illinois.

(P. O. drawer No. 20.)

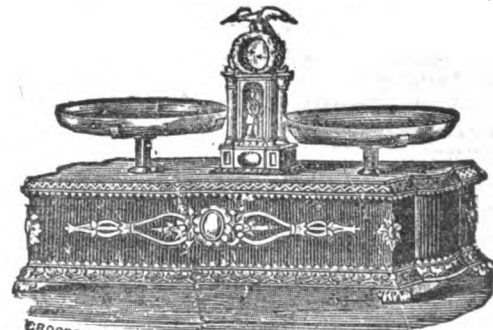
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Successor to CRAVEN & HART,
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EXTRACTS, NIGHT BLOOMING CEREUS,
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**HENRY TROEMNER,
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HOFFMAN'S PAT., 1868.

These Scales are in general use by the U. S. Government, in
the Mints, Treasury Departments, Hospitals, Assay Offices, &c.,
throughout the United States.

Store, 710 Market Street, Philadelphia.

☞ Every Scale leaving our Manufacture is branded with the
maker's name. No others are genuine.

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[ESTABLISHED 1836.]

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Preparations.

JUJUBE PASTE CAPSULES FOR PILLS AND POWDERS.
224 WILLIAM STREET, N. Y.

CODMAN & SHURTLEFF'S

Apparatus for Local Anæsthesia and Atomization of Liquids.

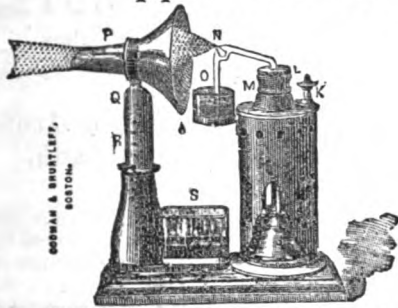


Fig. 1. U. S. Army Standard. (Pat. March 24, 1868.)

This Steam Apparatus has been placed upon the Supply Table of the U. S. Army as the Standard. Its joints are both screwed and soldered. It cannot be injured by exhaustion of water or by any steam pressure attainable.

Price, \$12 00.

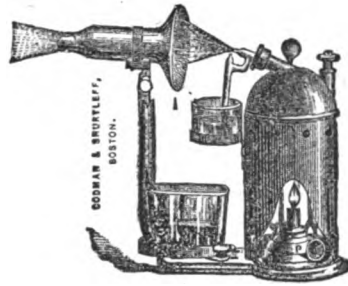


Fig. 15. The Complete Steam Atomizer (new). (Patented March 24, 1868.)

All its joints are hard soldered. It cannot be injured by exhaustion of water or any attainable pressure.

It does not throw sprits of hot water; is convenient, durable, portable, compact and cheap, in the best sense of the word. **Price, \$6 00.**

Neatly made, strong, Black Walnut Box, with convenient handle, additional, **\$2 50.**

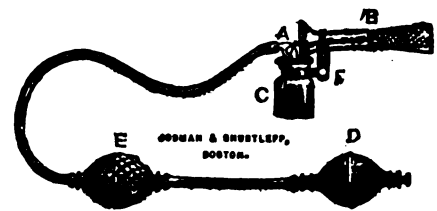


Fig. 5. The Shurtleff Atomizing Apparatus. (Patented March 24, 1868.)

The most desirable Hand Apparatus. Rubber warranted of the very best quality. Valves of hard rubber, every one carefully fitted to its seat, and work perfectly in all positions.

The Bulbs are adapted to all the Tubes made by us for Local Anæsthesia in Surgical Operations, Teeth Extraction, and for Inhalation.

Price, \$4 50.

Each of the above Apparatus is supplied with two carefully made annealed glass Atomizing Tubes, and accompanied with directions for use. The Steam Apparatus is tested with steam at very high pressure. Each Apparatus is carefully packed for transportation, and warranted perfect. Also,

Hand Ball Apparatus (Fig. 5, without shield), with two Glass Tubes.....\$4 00

Silver Plated Tubes, for Local Anæsthesia and for Inhalation, each.....2 00

Rhigolene, for Local Anæsthesia, best quality, packed.....1 00

Nasal Douche, for Treating Diseases of the Nasal Cavity, six different varieties, each with two Nozzles, packed.....\$1 25, 1 50, 2 00, 2 50, and 3 50

N. B.—To save collection expenses, funds should be sent with the order, either in form of draft, post-office order, or registered letter.

[For complete Illustrated Price-list of Apparatus, Tubes, &c., see Pamphlet.]

WILL BE SENT BY MAIL (POST-PAID) ON APPLICATION,

A PAMPHLET containing two Articles, by distinguished Foreign Authority, on

"INHALATION OF ATOMIZED LIQUIDS,"

WITH FORMULÆ OF THOSE SUCCESSFULLY EMPLOYED.

Also, an Article by Dr. J. L. W. THUDICHUM, M. R. C. P., on

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WITH HIS FORMULÆ.

Also, an illustrated description of the BEST APPARATUS for the above purposes, and for producing LOCAL ANÆSTHESIA by Atomization with Ether, by the method of Dr. RICHARDSON, of London; or with Rhigolene, as described by Dr. HENRY J. BIGELOW, in the *Boston Medical and Surgical Journal*, of April 19, 1866.

All our Atomizing Apparatus is made with the utmost care with view to its complete efficiency, convenience and durability, and every one is warranted. The Steam Apparatus (Fig. 1) has been adopted into the "Supply Table" as the standard for the United States Army. A Gold Medal has lately been awarded us by the Middlesex Mechanics' Association, for Atomizing and Surgical Instruments, as will be seen from the following report, signed by a leading New England Surgeon and Physician:

"1503. Codman & Shurtleff, Boston, Mass. One Case Surgical Instruments and Atomizers.

"The Committee have no hesitation in awarding for this superb exhibition the highest premium. * * * * * The various other Instruments for Inhalation of Atomized Liquids, and for Local Anæsthesia, were all apparently faultless, both in design and workmanship. The exhibitors are regarded as more especially deserving of the highest token of merit for having produced nothing except of their own manufacture.

GOLD MEDAL.

"(Signed),

GILMAN KIMBALL, M. D., Chairman."

The following is an extract from a note from Dr. BIGELOW: "I have thus far found nothing better for freezing with Rhigolene than the tubes made by you after the pattern I gave you, and which I still use with your other apparatus."

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" " Disarticulating.....	8 50	Lente's Intra-Uterine Caustic Instruments.....	1 50 to 4 00
Simple Throat Mirrors.....	1 50	French Rubber Urinals, with valves, male, for night or day.....	6 00
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Milner's Intra-Uterine Scarificator (post-paid).....	7 00		
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Their Superiority over all the other Capsules consists in their ready solubility in the stomach, insuring, therefore, a prompt cure.

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Dragees and Syrup of
IRON.**
(Pyrophosphate of Iron.)

This preparation was first introduced in America (1867) by E. FOUGERA, Pharmacist. Its increasing and constant favor among Physicians is the best proof of its real merit.

It is prescribed in all DISEASES requiring IRON and PHOSPHORUS, a tonic and a stimulant. As a nervous tonic, no other can supply its place.

**FOUGERA'S Ready-made
MUSTARD PLASTER,**

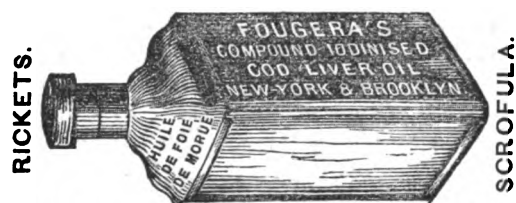
A most Useful, Convenient, and Desirable Preparation, far Superior to a Common Mustard Poultice.

Always Ready for Immediate Use.

Clean, prompt in its action, and keeps unaltered in any climate; easily transported and pliable, so as to be applied to all parts and surfaces of the body. At the request of Physicians, it is prepared of two strengths:

No. 1 of Pure Mustard; No. 2 of Half Mustard. Each kind put up separately, in boxes of 10 Plasters. Only one Size.

**FOUGERA'S
COMPOUND IODINIZED**



CONSUMPTION. GENERAL DEBILITY.

COD LIVER OIL.

Five Times as Efficacious as Pure COD LIVER OIL.

Ten years of experience, and of a constantly increasing success, supported by the approval of hundreds of honorable Physicians, and by the eulogies of the Medical Press of the United States, East, West, North and South, have abundantly proved the immeasurable Therapeutic Superiority of this Oil over all the other kinds of Cod Liver Oil, sold in Europe or in this country.

This Oil possesses not only the nourishing properties of Pure Newfoundland Cod Liver Oil, but also the

Tonic, Stimulant, and Alterative Virtues of Iodine, Bromine, and Phosphorus,

WHICH ARE ADDED IN SUCH PROPORTION AS TO RENDER

FOUGERA'S COD LIVER OIL

Five times as Strong and as Efficacious as Pure Cod Liver Oil, saving, therefore,

TIME, MONEY, SUFFERING AND LIFE.

A trial of this Oil has been made by the Physicians of Bellevue Hospital, New York, on Eighty Cases, with the most gratifying results.

**FOUGERA'S
IODO-FERRO-PHOSPHATED ELIXIR OF
HORSE RADISH.**

This Elixir, composed (1867) by E. FOUGERA, contains Iodine, Pyrophosphate of Iron, the active principles of WATER-CRESS, SCURVY GRASS, HORSE RADISH, and General Aromatic substances—Wine, Alcohol, Sugar, &c. This Elixir, acting as a

Diuretic, Tonic, Stimulant, Emmenagogue, and a Powerful Regenerator of the Blood,

Is a most invaluable remedy for all constitutional disorders due to the impurity and poverty of the blood.

**FOUGERA'S
PECTORAL PASTE,**

Au Lichen et au Lactucarium.

Used with great success against Nervous and Convulsive

Coughs, Hooping Cough, Acute Bronchitis, Chronic Catarrh, Influenza, &c.

WAKEFULNESS, COUGH, and other sufferings in Consumption are greatly relieved by the Soothing and Expectorant Properties of this Paste.

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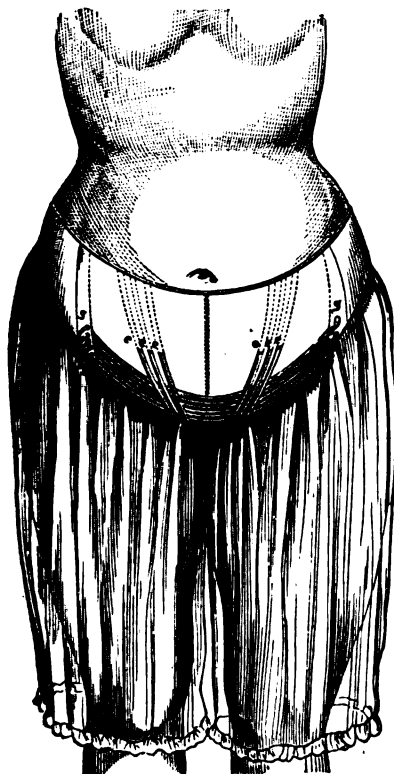
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DESCRIPTION OF THE PLATE.

THE PLATE represents a front view of the Supporter, made in the form of drawers: *e e e* are stays—one or more in number, as the case requires; *g*, a series of cords—of greater or less number, according to the wants of the patient—are so encased in the Supporters that the lowest one follows, or nearly follows, the contour of the base of the abdomen, and the others range parallel, or nearly parallel thereto; these cords are severally drawn tight or relaxed at will, and are retained to a given tension by being knotted where they emerge from the Supporter.

DIRECTIONS FOR TAKING MEASURES.

1st. Pass a tape measure entirely around the person, across the side or nameless bones. 2d. Across the abdomen, slightly anterior from one hip bone to the other. 3d. Across the front bone. 4th. From the top of front bone up to the navel. 5th. Top of hip bone around the limb to same point. 6th. From the top of the os pubis or front bone, between the limbs, up the centre of the back as high as top of the side bones. 7th. Top of hip bone, outside the limb, down to the knee. Four measures for the short Supporters, seven for the drawers.

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These electric disks are a great improvement, for the best of
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worn days only or nights only, and so becomes a successful aid
or remedy for many a lame or weak back, stomach, side or limb;
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The diligent electricity from this new magnetic alloy is now well attested
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the eminent Professor of Materia Medica and Therapeutics at Harvard College;
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of general practitioners and other leading medical men.

P. S.—Druggists will find these disks a superior article, compact, so very liable to break or
injury; no leakers; a convenient, popular remedy, now sold by all first-class druggists. In
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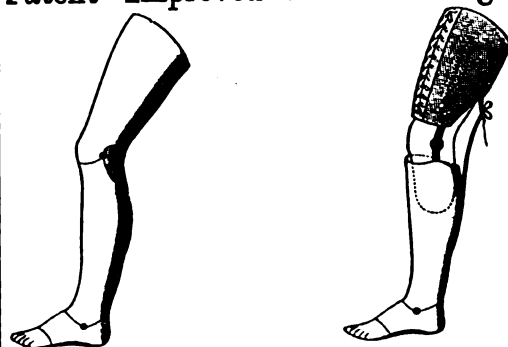
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Patent Improved Artificial Legs.



This invention stands approved by every Surgeon who
has examined it, many of whom had given testimonials
for others previous to the advent of this before the public.

It contains the requisite combination for the best, is less
complicated, lighter, stronger, more durable, and more
perfectly adapted to the wants and comforts of the wearer
than any other leg.

It has attained a perfection in its movement which en-
ables the wearer to walk, not only with ease, but in a
graceful and natural manner.

Mr. Clement has had a practical experience of twenty
years in the business, and during that time became ac-
quainted with the merits and faults of every kind of arti-
ficial limb, and now has combined the best principles of
those that had any with new improvements of his own.

The models which received the "Great Prize Medal"
at the World's Exhibition in London, and most of the
others which have been exhibited before scientific bodies
in this country, were made by Mr. Clement.

This limb is pronounced by many of the most eminent
surgeons as the "best" now made, and is endorsed by
the Surgeon-General U. S. Army, and adopted for the
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It is approved and recommended by the entire Faculty
of Jefferson Medical College, and is the only artificial
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The attention of Surgeons, Physicians, and all persons
interested, is most respectfully solicited.

Pamphlets containing information and references con-
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Original Communications.

Correspondence, Questions Asked and Answered, &c.

Large numbers of letters are constantly received from our subscribers, containing words of good cheer, and highly encouraging to our enterprise; from among them we have selected the following, which are fair types of their general character.

The first, from our personal friend, Prof. Nivison, of the Geneva Medical College, contains so many good suggestions that we take the liberty of printing it, though it was not intended for publication:

BURDETT, SCHUYLER CO., N. Y.,
January 19th, 1869.

MY DEAR DOCTOR.—I congratulate you on your entrance into the "Editorial Fraternity." I have read the two numbers of the PHYSICIAN AND PHARMACEUTIST. Somebody had sent me one number before. I was much pleased with it. It is an excellent thing for the busy medical practitioner, especially for physicians residing in the country. The more elaborate medical journals keep us *en courant* with the advances in physiology, pathology and general therapeutic indications. But precisely how best to fulfil those indications—just what are the best remedies, and how to prepare them, so that while they cure they shall, at the same time, present an *attractive appearance* and an *agreeable taste*—the more pretentious journals do not often condescend to inform us.

I am sure if we understood this matter better, and practiced it, our patients would be much less inclined to gravitate towards homoeopathy, or to swallow the thousand and one forms of sugar and villainous whiskey that are sold on every four corners under the name of "patent medicines."

Teach those of us in the country, who have to be our own apothecaries, the easiest way to make our remedies *agreeable*, and especially convince the druggists of the importance of so *concentrating* their remedies that they shall be *convenient* and *portable*, and capable of being *quickly transformed* into *elegant* preparations by the extemporaneous additions of simple syrup, or some other vehicle that can be commanded in every household, and you will do the profession a signal service.

Then, again, there are, I am sorry to say, thousands of medical practioners in the country who never take any medical journal, who live on in blissful ignorance of the improvements in medicine, who would take a journal like yours, provided it is sold cheaply, and caters properly to their wants. I hope to see the next number when out.

Yours truly, NELSON NIVISON, M. D.

EFFINGHAM, ILLINOIS, Jan. 5, 1869.

TO THE EDITOR OF THE PHYSICIAN AND PHARMACEUTIST.

DEAR SIR,—Here enclosed find fifty cents for one year's subscription to THE PHYSICIAN AND PHARMACEUTIST. Also will I suggest, to the question asked: What is the best treatment in Chronic Cystitis?

ANSWER.—Injections into the bladder with narcotized emolient solutions, often repeated, and then

R { Balsam Copaiva.....f 3 iv.
Flax Seed Infusion.....f 3 iv.
Tincture Opii.....f 3 ss.

To be injected into the bladder every other day, or less often, according to the condition of the patient. This mode of treatment has given me very good results, especially in a case of years' standing.

Where can I get the best information in regard to the action of the hypophosphites on the human system generally?

I shall do all I can towards your journal. It is worth keeping on the desk of every physician.

Yours respectfully,

LEON J. WILLIEN, M. D.

We cannot refer Dr. Willien to any special work on the subject, but would simply suggest that any recent work on therapeutics, or on the practice of medicine, will give all the information required. See U.S. Dispensatory, 12th edition, p. 1531, for a good article and its references.

[Ed. of P. & P.]

How can a liquid soap, suitable for cleansing teeth, be prepared? N. W. B.

What course of treatment is most effectual in pyæmia?

Yours, N. M. PERRY, M. D.

Troupsburg, N. Y., Feb. 1869.

What is the best method of treating incontinence of urine in children? Please answer through your journal. Also, the best method of preparing peppermint essence, so that it will be as clear as water.

J. W. GROESBECK, M. D.

Ergot in Obstinate Hæmoptysis.—Dr. Dobell, of England (*Med. and Surg. Reporter*), urges ergot in obstinate hæmoptysis in tuberculous patients. His prescription is complicated, but he claims to have had from it most satisfactory results. It is as follows:

R. Ext. ergot liq.....f 3 ij.
Tinct. digit.....f 3 ij.
Acid. gallici.....f 3 j.
Magnes. sulph.....3 vj.
Acid sulph. dil.....f 3 j.
Infus. ros. acid.....f 3 viij.

M. One-sixth of this to be taken every hour until the bleeding ceases.

Sugar-Coated Pills.

We have received a neat package from Wm. R. Warner & Co., Pharmaceutical Chemists, 154 North Fourth Street, Philadelphia, containing a dozen bottles of sugar-coated pills, of official and unofficial proportions. The formula of each pill, weight and dose, are printed on the label of each bottle. We believe the reputation of the house is a sufficient guarantee for the purity of the drugs employed, and we can vouch for the elegance of the pills so far as pharmaceutical skill is concerned in their manufacture.

Unguent for Acne.—The following ointment is useful in all the forms of acne: Washed lard, fifty parts; sublimed sulphur, tannin, of each four parts; laurel water, five parts. The proportions of sulphur and tannin may be increased, according to circumstances, to six or eight parts. —*Braithwaite's Retrospect.*

Solvent for Gallstone and Cholesteroline.—Dr. Buckler (*Am. Journal of Med. Science*), recommends the following prescription in the cholesteroline diathesis: R Hydrat. succin. of iron 3 iss, water 3 iss. Dose, a teaspoonful after each meal, to be taken six months, if necessary.

Colliquative Sweats.—Dr. J. D. Upshur reports the following: A stout, healthy, mulatto woman aborted at the sixth month. The labor was an easy one, and had a good getting-up. There was no discharge of any kind until the third day; when she began to sweat profusely. This continued some days, when the aromatic sulphuric acid was prescribed. In 36 hours the sweating ceased and the lochia appeared. The acid was then stopped, the lochial discharge was suspended, and the sweating re-appeared. The acid was again given with the same result. At the end of the third week the sweating ceased entirely, the lochia having never returned. The sweat was quite offensive, and had somewhat the odor of lochial discharge, and did not seem to exhaust the patient at all. There was a large secretion of milk, and at the end of three weeks she was well and able to work.—*Richmond and Louisville Med. Journal.*

I will divide a Lucrative Practice with an able Physician for a proper remuneration.

Address, Medicus; or call on Mr. ANDRUS, at 122 Liberty Street, for further information.

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These TROCHES have proved very valuable in Indigestion, Gastrologia, Gastralgia, Pyrosis, Heartburn, Flatulency and Want of Appetite. Also, recommended particularly in Nausea and Sickness experienced by Females during Pregnancy.

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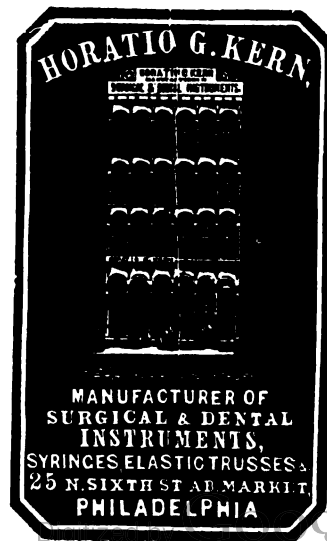
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Each Cake is Stamped "A. A. CONSTANTINE'S Persian Healing, or Pine Tar Soap. Patented March 12, 1867." No other is genuine.

To guard the people against fraud and deception, the portrait of A. A. Constantine, and his signature, in a *fac simile* of his handwriting, will appear on all our circulars and fancy boxes.

It cures Pimples on the Face, Cracked or Chapped Hands, Salt Rheum, Frosted Feet, Burns, Fresh Cuts or Wounds of all kinds, all Diseases of the Scalp and Skin, and is a GOOD SHAVING SOAP.

What Those Say Who Use It.

I have used your Persian Healing Soap in my practice extensively, and it has proved the best healing soap I ever used. It has no equal as a soap for washing the heads and skin of children.

L. P. ALDRICH, M. D., 19 Harrison Street, N. Y.

I have used the Tar Soap of Mr. A. A. Constantine, and think it a valuable preparation. Good for the toilet as well as for the various medicinal purposes for which it is recommended.

JOSEPH S. CRANE, M. D.,
46 W. 24th St., New York.

Baldness Cured.

I can recommend your Persian Healing Soap for Baldness; it is bringing my hair in beautifully. I consider it the best hair renovator in use.

M. H. COMBS,
218 Atlantic St., Brooklyn, N. Y.

Messrs. A. A. CONSTANTINE.

My wife has used your Persian Healing Soap for Erysipelas with the happiest result. I would recommend it as a proper and efficient adjuvant in the cure of many species of chronic cutaneous diseases.

S. W. MARPLE, M. D.,
Elmira, N. Y.

It accomplishes all it claims.

R. HAMILTON, M. D.,
Saratoga, N. Y.

Of your Persian Healing Soap I can say: One of my young men cured pimples on his face, of many months' standing, in 10 days, leaving his face entirely smooth.

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Facts Worth Knowing.

Cider may be preserved sweet for years by putting it up in air-tight cans, after the manner of preserving fruit. The cider should be first settled and racked off from the dregs, but fomentation should not be allowed to commence before canning.

Transparent Soap is prepared by drying ordinary soap in a stove, dissolving it in hot alcohol, leaving the solution at rest to allow the impurities to settle down, or removing them by filtration, the filter being supported on a funnel surrounded with hot water, then distilling off the alcohol till the residue acquires such a consistence as to solidify when cooled in metallic moulds.

How to Stop Oil Fires.—A correspondent of the *Rochester Union* writes from Titusville, Pa.: "Allow me to suggest how a crude oil fire may be managed, for, with the large amount passing through your city on cars, some day you may have one. Keep the water away from it. As the burning fluid will of course run, the first thing, and the great thing is to dam it. Anything will do. A board stuck across a gutter, or wherever the oil may be running, will answer until it can be secured with mud. Then make a hole near the bottom of the dam, and if a pipe is handy put it in and allow the oil to run away. This oil will not be on fire, as the flame always lies on the surface. When the oil is lowered so that the hole or pipe would soon be exposed, stop up the opening, else the flame will follow. Then let the oil that may be left burn at its pleasure. The advantage of a pipe or tube consists in carrying the saved oil so far from the burning mass that the gas from the oil may not ignite from the flame. If water be thrown upon burning oil, its only effect is to bear the flaming fury onwards whithersoever the water bears it—into cellars, stores, and all over. Oil region experience discards the water treatment entirely.

Simple Mode of Performing Artificial Respiration in Asphyxiated Children.—Dr. C. Handfield Jones communicates to *The Practitioner* (March 1869) the following statement:

"During my presence at a confinement (in my own house) the child was born with several turns of the cord round its neck, and after it was released from these it lay with a swollen, livid face, and no attempt at respiration. As soon as possible I laid it down on its back, and made pressure on its abdomen; then raised it upright, on its seat; again laid it down and pressed the abdomen; again raised it upright, and so on. In the recumbent position the diaphragm was, of course, pushed upwards and expiration was imitated; in the sitting erect position the weight of the liver and abdominal viscera drew the muscles down, and inspiration was accomplished. The efficacy of the procedure was evinced in a very short time by the young gentleman making such vigorous use of his lungs that his cry was distinctly heard on the second floor below where he was. I do not think Dr. Marshall Hall's or Dr. Silvester's method could have answered better. Perhaps some practitioner may think it worth while to make a trial of this method."—*Am. Jour. Med. Sciences*.

Aneurism on the Pacific Coast.—The last number of the *Pacific Medical and Surgical Journal* contains a report of an interesting discussion, held at the San Francisco Medical Society, on the subject of aneurism. Dr. A. G. Soule presented a series of statistics, showing that in 34 months there had been in San Francisco 119 deaths from aneurism, a yearly average of 42:

"The average population of the city for that time being about 126,000, there would be one death from aneurism for each 3,000 inhabitants."

"For a period of nine years, from 1856 to 1864, inclusive, there were in New York City 243 deaths from aneurism—an annual rate of 27. Under the supposition that the average population of New York for the nine years was 720,000, there was one death from aneurism to every 27,000 inhabitants."

Thus the relative mortality from aneurism is nine times greater in San Francisco than in New York City.

As to the class of men affected with aneurism: "They have lived a rough, uncertain life, with no settled home or steady vocation; they have been tossed upon the sea of life and wrecked upon the shoals of disappointment. All were necessarily, in our young city, remote from their native land. Thirty-five were Europeans, and but ten natives of the United States. Nearly all had 'tried the mines,' worked hard, lived in a rough, exposed manner, imbibed freely of the ardent, returned disappointed to the city, taken lodgings in the rickety inhabitants of the city front, and worked by the hour or by the day at heavy, laborious, unsteady labor, alongshore. Idle the most of the time, they indulged freely in drink, and, when at work, stimulants were used to brace them up to their heavy labor. Many complained of rheumatism; many did not; a large proportion had suffered from syphilis; autopsies were made in all the cases, and degeneration of the arterial coats, athermatous, fatty, or calcareous deposits were found."

Dr. Gibbons, Jr., presented some additional statistics, which are both interesting and valuable:

"In England, for five years (1838-'42), there were 593 deaths from the disease, or an annual mortality of one for every 131,000 inhabitants. In the same country for four years, beginning with 1860, there were 1,546 deaths, an average of one a year for every 52,000 people. In New York City for 21 months, ending September 30, 1867, 21 deaths are reported, or one yearly for about 44,000 people. In Brooklyn for 18 months in 1866-'7, there were 12 deaths—one yearly for 37,000 inhabitants. Philadelphia reports eight deaths in 1863, and but four in 1864—one to 76,000 and one to 150,000 people, respectively. Boston reports seven deaths for two years, 1864 and 1865, or one death to 65,000 people; while St. Louis, with a population of over 200,000, reports but one death from aneurism in 1865. No deaths from this disease occurred in Chicago in 1865, in Providence, R. I., in 1864-'65-'66, or in the State of Rhode Island in 1863. For 1858, San Francisco reported six deaths; for 1869, 10 deaths; for 1866, 35 deaths; for 1867, 35 deaths; for six months of 1868, 28 deaths. This would give a ratio to the population for the years respectively, of one in 12,000; one in 8,000; one in 3,000; one in 3,700; one in 2,400. The per cent. of death from aneurism to the total mortality is as follows: England, 1860-'4, 0.09; New York, 1860-'7, 0.06; Brooklyn, 1866-'7, 0.09; Philadelphia, 1863, 0.06—1864, 0.03; Boston, 1863, 0.06—1865, 0.09; St. Louis, 1865, 0.02; San Francisco, 1858, 0.52—1859, 0.70—1866, 1.39—1867, 1.40—1868 (six months), 2.12."—*New York Medical Journal*.

From the report of the State Engineer of New York, for the year ending September 30, 1868, we learn that, on the steam railroads of this State during the year, 302 persons were killed and 358 injured. On the horse railroads 13 were killed and 90 injured. The number of passengers carried on the steam roads was 18,434,300, and on the horse railroads, 146,326,486.

By a report which we find in the *Lancet*, it appears that in Prussia, for the year 1867, 230 persons were killed, and 305 wounded on the railways in that kingdom. The total of passengers conveyed on these roads during that period was 38,766,866. Curiously enough, only two out of the killed were passengers. All the rest were either employes, or were killed while incautiously endeavoring to cross the tracks.—*N. Y. Med. Journal*.

The Mayor and the Quack Doctors.

SERIOUS CHARGES AGAINST A MEDICAL ESTABLISHMENT IN UNIVERSITY PLACE.

Some extraordinary charges were made before the Mayor's Marshal, yesterday, by Mr. S. J. McCracken, against the "New York Medical University," situated at No. 8 University place.

The complainant alleges that the establishment is a fraud; that he publishes a quack pamphlet, called the "University Almanac and Business Book;" that in this book representations are made that the place alluded to is a college with six or seven professors. The complainant says that it is conducted by two unprincipled persons, calling themselves Dr. J. Walter Scott and Wm. Tripp, and that they represent Dr. John Vanderpool, who is dead, and Dr. John E. Guidor and Dr. George P. Hoel-senberg, who are surgeons in the United States army; that there are no physicians or students in this so-called university; that it is carried on by Scott for his personal interest, giving Tripp twelve per cent. for his services. The complainant further alleges that these two men are accumulating wealth by means of fraud and false pretences. He cites as an instance a case where Andrew Mead, of Paterson, N. J., addressed a letter to Dr. Guidor, which was opened by Scott, and that Trip went to Paterson, representing himself to be Dr. Guidor, and received \$50 from Mead. The next day Trip received \$100 from the same person, and through the same representations. The complainant also alleges that Trip often represents himself to be Dr. John Vanderpool, and that there hangs over the mantelpiece in the reception room of the University place house a diploma of the New York College of Physicians and Surgeons, bearing the name of James W. Scott. This diploma, he says, Scott bought from one Thompson, for \$300, and by a chemical process the name it originally bore was erased, and that of Scott inserted. The complainant asserts that this place is a greater fraud than all of the gift jewelry stores in New York, and that hundreds of persons are swindled in it every week.

The Marshal has received affidavits from Alexander W. Morgan, of Passaic, New Jersey, and from John S. Campion, No. 235 Madison street, corroborating the statements.—*The N. Y. World*.

Arsenic.—As a poison the action of arsenic is depressing in the extreme; as a medicine it is tonic and invigorating, excites moderately the action of the heart and arteries, quickens the appetite, promotes digestion, often cures intermittents, and has been known to cure epilepsy. After it has been taken for a period of two weeks or more, there occurs a sense of warmth in the extremities, and a general feeling of improved health and invigoration. Some patients become plump under such a course, and thus feel in high spirits, and are conscious of an improved appetite. After a period of nine months the epithelial scales of the palms of the hands and the soles of the feet become, in some cases, slightly thickened or corny, and in persons of fair complexion a slight scurfiness of the skin in parts protected by the dress occurs. This account is given from an average of fifteen thousand cases, some of whom took the medicine continuously for seven years. Arsenic is not a cumulative remedy.—(Mr. T. Hunt, in *Braithwaite*.)

The medical dissecting bill was defeated in the Maine Senate. The bill delivered into the hands of the fraternity the bodies of any persons dying in their city or town, State prison or jail, whose burial must be at the public expense, provided the deceased made no request to be buried, or if his remains were not claimed by friends or kindred. Even in this mild form it has been rejected.

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H. B. SANDS,	JOHN H. GRIBBOM,
E. R. PEASLEE,	GEO. T. ELLIOTT,
J. M. CARNOCHAN,	WM. H. DRAFER,
WM. A. HAMMOND,	AUSTIN FLINT,
J. J. CRANE,	LEWIS A. SAYRE,
A. REISIG,	C. R. AGNEW,
R. REISIG,	JOHN F. GRAY,
J. G. BALDWIN,	ROBERT STEWART,
E. WEST,	W. T. OKIE,
DRA. RANNEY,	P. C. COLE,
C. E. BLUMENTHAL,	WM. EAGER.

In preparing it the heat is regulated by a Thermometer—if too much heat the life of the flour is killed; if too little the Food would be indigestible. I transform the starchy substance into dextrine of sugar. Cooks or nurses cannot prepare from Liebig's formula. It is equally good for invalids and dyspeptics, and I have the names of several invalid Physicians who are living upon my Food. Respectfully,

ROBERT H. TABER, Successor to G. W. COMSTOCK,
176 FULTON STREET, N. Y.

BEHOLD WHAT GOD HATH WROUGHT IN THE KERNEL OF WHEAT:

It contains dextrine of sugar (starch), being the fuel which, under the influence of oxygen, is consumed and produces animal heat. It is oxidized, and the ashes

rejected through the respiratory organs. The heat imparted by this combustion is necessary to the proper fulfilment of the functions of the body, of which digestion and assimilation are the most important. The digestive apparatus receives the gluten and starch of the grain; the latter is pushed forward to be burned, the former enters the circulation and out of its contained iron, potash, soda, magnesia, lime, nitrogen, &c., are manufactured all the important tissues and organs of the body. All of the iron is retained in the blood, and much of the soda and phosphoric acid; the lime goes to the bones, and the magnesia abruptly leaves the body, as it seems to be very plainly told that it is not wanted. Such, in brief, are the uses which the organic and inorganic constituents of a kernel of wheat subserve in the chemistry of animal life. And should we not appropriate them to our own use, as the most carefully adjusted of all materials designed for human aliment? In COMSTOCK'S RATIONAL FOOD are combined the chemical offices which the substances found in a kernel of wheat perform in the animal economy, and are made of wonderful nutritive and restorative value to the feeble infant, invalid or dyspeptic.

The following letter from DR. HELMUTH, of St. Louis, who stands at the head of his profession, is one of very many similar letters from Physicians and others:

St. LOUIS, MO., June 12, 1867.

MR. GEO. WELLS COMSTOCK,

DEAR SIR:—I have used the Food which you manufacture for Infants, Invalids and Dyspeptics, and cheerfully recommend it as the BEST ARTICLE NOW IN USE.

Very respectfully,

WM. TOD HELMUTH, M. D.

Dr. James R. Wood, Dr. James R. Little, and other

eminent Physicians have used it in their own families

and I am permitted to refer to many eminent Physicians

who prescribe it.

Sold by druggists.

ROBERT H. TABER, Successor to G. W. COMSTOCK,

176 Fulton street, near Broadway,

New York.

ALL PHYSICIANS,

Of every school, agree in two simple doctrines:

1st. That nearly all chronic diseases originate from disorder in the digestive organs (the stomach, intestines, liver, &c.), and a consequent imperfect nourishment

2d. That the temporary and illusory relief obtained by pills, purgatives and injections, is purchased at the high price of an aggravation and perpetuation of the diseases they are directed against.

In Dr. Abernethy's excellent work on Local Diseases, he says: "Disorders in the stomach and intestines produce in the *Nervous System* a diminution of the functions of the brain so as to cause apoplexy, paralysis, delirium, stupidity, or the opposite state of irritation and pain, and in the *muscular system* weakness, tremors, palsy, or spasms and convulsions, in children especially." By correcting the disorders of the digestive organs, local diseases, which have baffled all attempts at cure by local means, have been speedily removed. The natural soothing, correcting action and effect of COMSTOCK'S RATIONAL FOOD upon these delicate organs, remove diseases resulting from constitutional weakness, or brought on by neglect or the excesses of years, while the action of medicines produce a greater degree of weakness, and consequently aggravate and perpetuate disease.

COMSTOCK'S RATIONAL FOOD is a Medico-Scientific Food, analogous to breast milk. Either to be given in conjunction with the breast, as a relief to the mother in case of defective lactation, or for the sole rearing of infants by hand, whereby hereditary taint will be prevented, and better structural and physical development of the babe attained.

When prepared according to the directions, it produces a food for infants similar in appearance and taste, and in chemical composition, to healthy human breast milk. It may be given alternately with the mother's milk, or, when circumstances require, it may be used as the sole food until the child is weaned, or has arrived at an age requiring a stronger diet.

This article has borne the test of trial, and we have the testimony of our most experienced and discriminating physicians that it agrees in most cases with infants much better than any other articles yet introduced.

Comstock's Rational Food for invalids and Infants.

We take pleasure in recommending the above very valuable preparation. It is composed of malt and wheaten flour, scientifically prepared and ready for use, similar to Professor Liebig's celebrated improved formula. It is a most excellent substitute for breast milk for young children, as well as a good dietetic preparation for invalids and dyspeptics, being readily digested, and affording an agreeable and useful nutriment for weak and feeble persons who, from prostration by disease, are unable to retain more solid food.—*St. Louis Medical Reporter*, July 1.

REED, CARNRICK & ANDRUS, MANUFACTURING CHEMISTS & PHARMACEUTISTS,

122 LIBERTY ST. and 125 CEDAR ST., NEW YORK.

We offer for the approval of the Medical Faculty a class of preparations which undoubtedly possesses decided advantages over the Syrups and many of the Tinctures of the Pharmacopoeia. In nearly every case where these Syrups and Tinctures are administered there is much objection, either to the large amount of saccharine matter, or in many cases, the alcohols which they necessarily contain. We originally conceived the idea of presenting a large number of standard Medicinal agents, in the form of *Elixirs*, which contain a small amount of saccharine matter and aromatics to render them palatable, and only a sufficient proportion of alcohol to preserve them.

Since we originated and introduced this class of preparations we have become convinced, from the extensive demand for them, and their approval by leading practitioners throughout the country, that they will, in all probability, become standard and official, possessing, as they do, such decided advantages over the Syrups and Tinctures.

The favor with which they have been received has induced a large number of parties to attempt their manufacture, some of which have a very little knowledge of chemistry or pharmacy, and others, whose reputation in the manufacture of Fluid Extracts and other fabrications, has decreased to an enormous percentage below the standard, and, therefore, now find it necessary to copy articles of our manufacture.

Not one of these houses has the courtesy to give us the credit as original producers, but, on the other hand, they watch with eager interest to learn of every new preparation, and immediately present it in such a manner as to convey the idea that they were the first to introduce it to the notice of the profession.

The present age demands improvements in Pharmaceutical Chemistry, and a large portion of our time is devoted to studying the wants of the profession in this respect. Our preparations will always be furnished at as low a price as will insure their purity and excellence.

Physicians and Druggists, in writing for our preparations, should designate them as R. C. and A's, to prevent the substitution of inferior articles.

Circulars containing minute description and formula of each preparation, also price lists, &c., furnished upon application.

Elixir Calisaya, Iron and Bismuth.

Since we originated this preparation it has become immensely popular in every part of the United States. It is extensively used in Dyspepsia, Anemia, Female Debility, and as a general tonic. (Dose—From a teaspoonful to a dessert spoonful.)

Comp. Elixir Stilllingia,

One of the most powerful, prompt, and efficient alteratives, and is used in Syphilitic, Scrofulous, Osseous, and Glandular Diseases, and in all depraved conditions of the blood. (Dose—One dessert teaspoonful.)

Comp. Syrup Stilllingia.

This preparation is indicated in all cases where a powerful alterative is required, and is, therefore, used with great success in Syphilitic, Scrofulous, Mercurial and Glandular Diseases. (Dose—From a teaspoonful to an ounce three or four times a day.)

30 grains of Iodide of Potassium may be added to each ounce of the above, and given in doses of a teaspoonful.

Elixir Cinchona, Iron and Strychnia.

The above preparation is being extensively prescribed throughout the country, and we have yet to learn of its not meeting expectations in every instance.

It is successfully used in all conditions of the system where a nervous tonic, combined with a general tonic, is required. (Dose—One teaspoonful.)

Elixir Pepsin, Strychnia and Bismuth.

This is an excellent preparation of the above valuable remedial agents, and is becoming extensively used in dyspepsia and kindred diseases.

The Pepsin we use is made expressly by us to insure its purity, as a large portion of that which is labeled Pepsin, in the market, is inert. (Dose—One teaspoonful.)

Wine of Calisaya.

A pleasant tonic, containing all the valuable properties of the best Calisaya, or Royal Yellow Bark, united with aromatics in a vinous menstruum. Adapted especially to females, children, and those with weak or delicate stomachs, and to the prevention of malarious diseases. (Dose—Half a wine-glassful two or three times daily.)

Elixir Valerianate of Ammonia and Quinine.

An excellent nervous stimulant and tonic, and used particularly in Neuralgic Affections, especially when they partake of a malarious form. (Dose—One teaspoonful three times a day.)

Elixir Gentian, with Chloride of Iron.

A powerful tonic in an elegant form, and very acceptable to the stomach. (Dose—One teaspoonful.)

Ferrated Wine of Calisaya.

We claim this to be the most elegant preparation of Bark and Iron that has been brought to the notice of the profession.

It is used as a general tonic in all debilitated conditions of the system.

Elixir Valerianate Zinc.

The offensiveness of the Salt is very effectually disguised. Used as an anti-spasmodic in Neuralgia, Cholera, Nervous Headache, Dysentery, &c. (Dose—Two teaspoonfuls.)

Comp. Elixir Rhubarb and Columbo.

Used in Dyspepsia, especially in those cases where an iron tonic is indicated in connection with the Rhubarb and Columbo. (Dose—From one to two teaspoonfuls.)

Syrup Phosphate Iron, Quinia and Strychnia.

A powerful general tonic and stomachic, used in morbid conditions of the nervous system, chronic diseases of the kidneys, many forms of cutaneous diseases, where a tonic effect is desired, and in cases of strumous children, threatened with scrofulous degeneration. (Dose—From 30 drops to one drachm.)

Elixir Bark and Protoxide of Iron.

This is a concentrated preparation of Bark and Iron, and is used in all debilitated conditions of the system. (Dose—One teaspoonful.)

Elixir Iodide of Calcium and Protoxide of Iron.

This elegant preparation is particularly applicable in those cases where an iron tonic is indicated in connection with an alterative. In such diseases as Syphilis, Scrofula, Strumous Sores and Eruptions, and all diseases of the blood attended with debility. (Dose—From one to two teaspoonfuls.)

Elixir Valerianate of Ammonia,

Indicated in Neuralgia, Hysteria, Nervous Headaches, and in cases where a quieting nerve is desired. Each drachm contains two grains of Valerianate of Ammonia. (Dose—One teaspoonful from three to six times a day.)

Citrate Bismuth.

This salt is readily and perfectly soluble in water, with the addition of a small quantity of Aqua-Ammonia. Its solubility is supposed to render it more efficient in smaller doses. (Dose—From two to five grains.)

In addition to the above list, we manufacture Arnica Plaster, Arnica and Bella-Ionna Plaster, Burgundy Pitch Plaster, Strengthening Plaster, Warming Plaster, and most of the Standard Official Preparations.

Aromatic Elixir Rhubarb and Magnesla.

This Elixir is an agreeable laxative, anti-acid and tonic. Useful in cases of Constipation, Piles, Diarrhoea, Dysentery, Cholera Morbus, Cholera Infantum, Acidity of the Stomach, and as a laxative, in pregnancy. (Dose—For an adult, from a teaspoonful to a table-spoonful; for children in proportion.)

Wine of Wild Cherry.

This preparation will be found particularly applicable in those cases where the digestive organs require a tonic and stimulating influence, and, at the same time, a sedative action on the nervous system and circulation. Indicated in inflammatory and febrile diseases, certain forms of Dyspepsia, Hooping Cough, and as a palliative in Pulmonary Diseases. (Dose—From two teaspoonfuls to half a wine-glass.)

Ferrated Wine of Wild Cherry,

Particularly valuable in those cases where an iron tonic is indicated with the sedative properties of Wild Cherry Bark. (Dose—Two teaspoonfuls three times a day.)

Elixir Bark and Pyrophosphate Iron

Contains the valuable properties of Iron, Phosphorus and Calisaya; is an agreeable combination, particularly useful as a general tonic, in anemic and debilitated conditions of the system. (Dose—From a teaspoonful to a dessert spoonful three times a day.)

Styptic Colloid.

This preparation is recommended to possess advantages over any other artificial coating, in every respect. It produces no irritation or pain when applied to excoorations. The air is perfectly excluded, and there is consequently no decomposition. It solidifies either blood, serum, pus or albumen, and, therefore, forms a perfectly adhesive film.

Chlorodyne.

This preparation has been used very extensively in Europe for a number of years, with great success. It is one of the most positive remedies in Cholera, Diarrhoea, Dysentery, and has been used in Consumption, Bronchitis, Croup, Asthma, Hooping Cough, Fever and Ague and Neuralgia. (Dose—From five to thirty drops.)

Syrup Iodide of Starch.

This compound is recommended by Dr. Andrew Buchanan, of Glasgow, as a means of administering Iodine in large doses, without causing irritation of the stomach. (Dose—From one to four table-spoonfuls a day.)

Syrup Iodide Iron and Manganese,

Suited to the treatment of anemia, resulting from obstinate intermitting fevers, and scrofulous, syphilitic and cancerous affections. (Dose—Ten to thirty drops.)

Syrup Iodide of Calcium.

This is an elegant preparation of one of the best forms of the Iodides. It contains a larger proportion of Iodine than Iodide of Potassium, and is unquestionably a better Alternative. (Dose—From one to two teaspoonfuls.)

Bitter Wine of Iron,

Well adapted to all cases of general debility, where a tonic and gentle stimulant is required. (Dose—From one to two table-spoonfuls.)

Deodorized Infusion of Opium, U. S. P.

Pure Cod Liver Oil.

Wine Pepsin.

Cantharidal Vesicant.

Tannate Bismuth.

Comp. Syrup Hypophosphites (Iron, Lime, Soda & Potassa).

Syrup Hypophosphites (Churchill's).

Syrup Phosphates, Chemical Food.

Syrup Sarsaparilla, with Iodide Calcium.

Syrup Citrate Iron.

Syrup Citrate Iron and Quinine.

Syrup Superphosphate Iron.

Syrup Protoxide of Iron.

Solution Cutta Percha.

Elixir Pyrophosphate of Iron.

Liquid Bismuth.

Elixir Valerianate of Strychnia.

THE Physician and Pharmacist.

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No. 2.

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ORIGINAL AND SELECTED ARTICLES.

Carbolic Acid in Scarlatina.

To the Editor of the Physician and Pharmacist.

I wish to add the weight of my testimony to the beneficial influences arising from the local use of the acid in the Anginose variety of scarlet fever. Not only does it materially lessen the inflammatory processes within the fauces, and conduce to the comfort of the little patient, but it prevents in some way, through its action upon the parts, septic poisoning, heals the ulcerated spots readily, and most effectually prevents the viscid faucial secretions from accumulating to an extent sufficient to embarrass the efforts at respiration. The tonsils, I have observed, resume their normal tint much sooner after its use than from any other local agent. Besides, the liability to consecutive abscess and otorrhea has been diminished in a very marked degree. So, too, does the tendency to serous transudation seem to be obviated, due precaution being exercised against a change of temperature for three weeks succeeding the desquamative stage, at which time the liability to renal congestion is greatest. Within the past five weeks I have treated nineteen cases between the ages of one and ten years without a single fatal result. In eleven, the febrile movement reached its maximum intensity. Delirium and great restlessness, with stupor, obtained in all these cases—the range of the pulse 140 to 155 to the minute. The heat of skin was lessened by constant sponging with cool or tepid water and vinegar, iced lemonade *ad libitum*, to allay thirst and soften the parched and swollen tongue, with occasional laxatives, and a solution of chlorate potassa, two drachms to the pint, as a drink, together with the following topical solution to the tonsils twice daily (R Acid Carb. f. 3ss, glycerine, Aq. distil. aa. ʒ iss misce) constituted the treatment.

To combat renal congestion spt. nit. dulc. in ten drop doses was relied on. Milk punch and animal essences were freely used when the heat of skin subsided. The acid assuredly supplies a void long felt by the profession; but let us hope that its value will neither be over estimated nor the remedy discarded until well tested.

A. M. CARPENTER, M. D.

KEOKUK, IOWA.

Routine Practice.

Every physician must acknowledge that routine practice is a great stimulus to quackery. The practitioner who confines himself to a particular set of remedies, regardless of circumstances, is not only aiding and encouraging the legion of quacks and pretenders—the enemies and degraders of a most honorable profession—but is guilty of neglect of most sacred duty. He is gradually but surely weakening the source from which he derives his support; and, what is of not less importance, he is every day consigning suffering humanity to a class of unprincipled knaves, who may hide from the eyes of the law in the shadow of a pestle and mortar. What greater encouragement could the charlatan desire than the careless indifference of the orthodox school to scientific progress. To-day there are thousands who, having graduated

anterior to the introduction of Hahnemann's peculiar theory, still persist in the use of the disgusting dose, and defend the practice with reasoning equally progressive—"It's the good old way; I have no faith in these new-fangled remedies; they may all be good, but I don't know that they are; my patients do better if they know they are taking medicine."

Can the public be blamed if they seek to escape the offensive features of a system of a former century? Is there anything wonderful in the success of homoeopathy?

The regular and well educated physician has good cause for complaint against the miserable laws that particularly concern his profession in this country. The almost entire absence of any form of protection to the public or the well qualified practitioner, must be, until remedied, a reproach to a nation that in all else leads the van of civilization. There is no less reason for complaint against bigotry and indifference on the part of many who should rather be the reformers.

The physician who uses every available means to exhibit his remedies in the most elegant and agreeable form, shows a true appreciation of a really scientific, though much neglected part of his profession.

The administration of drugs in their crude and bulky form is as reprehensible as it would be to ignore anesthetics in the amputation of a limb. Not a physician, doing any considerable amount of practice, but can tell how often the patient complains that they "cannot take more of that medicine." How often is such a complaint made by those whose condition calls forth tender consideration in all else but that one thing.

Is it merciful or feeling to prescribe a dose for a child that you are almost certain will require the strength of a man to administer? It may be said that such a course is often unavoidable, but such is not the case. The science of Pharmacy has provided for it all, and every practitioner, be he in large city or country, can avail himself of elegance as well as efficacy in his prescriptions. It is not necessary that he should violate professional ethics by patronizing those who are constantly using the profession as a cloak to their patent nostrums—advertising in medical periodicals—while they are flaunting the same worthless combinations, not only in the columns of illustrated weekly papers, but upon every wall and conspicuous place throughout the country. It is, of course, the duty of the physician to discountenance and put down such, by using care in selecting the manufactures of a house of undoubted integrity.—F. W. Mercer, M. D.

Open Cancer.

We learn that the exquisite pain which belongs to open cancer is found to be best relieved by the stramonium ointment, which is employed in London. The following is the formula: Half a pound of fresh stramonium leaves and two pounds of lard. Mix the bruised leaves with the lard, and expose to a mild heat until the leaves become friable, and strain through lint. The ointment thus prepared is spread upon lint, and the dressing changed three times a day.

The Cinchona Tree has been imported from Ceylon to Jamaica, with promise of successful results.

Personal.

Mr. George Peabody, the Philanthropist, though dead, yet speaketh!

The German Hospital was opened for reception of patients September 13th.

There is a model old lady in Grafton, N. H., 109 years old, who threads her needle and reads fine print without the aid of spectacles.

A couple recently walked twenty-eight miles in Illinois to find a justice to marry them.

A New Orleans attorney had for a client a young woman whose leg had been bitten by a dog, and had referred to the circumstance as an injury to "that elongated member which assists in sustaining the body in its efforts at locomotion."

The principal of a young ladies' seminary in Massachusetts says his grounds are "protected by powder and ball," and he notifies "cousins" to take warning.

A colored woman in Charleston has been making money at a rapid rate by the exhibition of four babies, which she pretended were born at a birth. The Governor sent her a new milch cow, which exploded the game—it appearing that the sable infants belonged to two mothers, who, having quarrelled over the possession of the cow, confessed the joint-stock agreement.

American Medical Missionary in China.—The American Presbyterian Mission has a medical missionary department in Canton and vicinity. It has done a great deal of work the past year, treating 50,636 out-patients and 1,038 in-patients, and has performed 1,038 surgical operations, some of them of great importance. A medical class numbers 12 scholars. It ought to be increased so as to form a large medical school. Will some wealthy American physician give the funds?—*Med. and Surg. Reporter.*

Mary H. Stinson, M. D., of Norristown, Pa., a graduate of the Woman's Medical College of Pennsylvania, has been appointed Assistant Physician in the woman's department of the Massachusetts State Lunatic Hospital, at Worcester, Mass.

It is said that the Medical Faculty of Paris have recently conferred the degree of doctor of medicine upon three ladies—a French woman, a Russian and an American.

A Fecund Family.—We obtain the following from the Cincinnati Commercial:

"McCoy—BROWN.—In Carroll Co., Ga., August 8, 1869, to Mrs. Jane S. McCoy, twins; and on the same day, in the same house, to her daughter, Mrs. Ann Brown, twins, all boys. The last named is said to be only 15 years of age; grandmother, 28; great-grandmother, 48."

We should say this was hard to beat.—*Reporter.*

Resignation in the Medical School of Maine.—Prof. S. T. Dana, of Portland, has resigned the Chair of Theory and Practice in the Medical School of Maine, and Prof. A. B. Palmer, of Michigan, has been appointed in his stead.

Dr. James McNaughton has been elected president, and Dr. James H. Armesby professor of surgery by the faculty of the Albany Medical College, in place of Dr. Marsh, deceased.

The Case of Dr. Paul Schoeppe.—The Medical Association of the District of Columbia have adopted resolutions requesting Governor Geary to suspend the execution of the sentence of Dr. Paul Schoeppe, convicted at Carlisle, Pennsylvania, of the murder of Miss Stinnecke, on the ground that the chemical evidence was insufficient, and failed to prove satisfactorily the presence of hydrocyanic acid or any other poison in the stomach of the deceased.

A New Firm.

Dr. E. P. BANNING, Jr., son of Dr. BANNING, author of "Banning's Mechanical Pathology and Therapeutics, and of the Banning System of Mechanical Support," and Dr. C. L. GREEN, late Passed Assistant Surgeon, U. S. Navy, concerning whose treatment and dismissal from service, for obeying conscience and being a medical gentleman, the profession has heard considerable of late through journals, have opened an office at Atlanta, Ga.

Professor Behm, of Berlin, Prussia, died during the past month of a dissection wound.

Prof. von Graefe, soon after his return to Berlin from Italy, whither he had gone on account of his health, lost all the benefits of his absence, and has had to abandon his professional employments to seek again the benefits of a warmer climate.

Cleft of the Soft Palate.—In 1816 Graefe, of Berlin, was the first to attempt the operation for cleft of the soft palate.

The Blind Preacher.—The Rev. William H. Milburn, the well known blind preacher, has just returned from a long absence in Europe, whither he went seeking aid from Graefe, the noted oculist of Berlin. The operation he went through was successful to a certain extent, but has not as yet at all improved the vision, Mr. Milburn still having only a vague impression of light, without being able to see even the outlines of objects. He returns, however, in excellent health, proposing a winter's campaign among the Lyceums with "What a Blind Man Saw in Paris," and "What a Blind Man's Experience was in Searching for Light," and hoping in the spring to go back for another, and, as he trusts, successful operation. His address for some little time will be at Jacksonville, Illinois.

Dr. Ezra Carr, of New Hampshire, formerly professor in Castleton Medical College, has been appointed professor of Agriculture, Agricultural Chemistry and Horticulture, in the University of California, San Francisco.

Karl Formes, the basso singer, has married Dr. Laura Rausch, Consul Murphy, of the United States, performing the ceremony at Frankfort-on-the-Main.

Dr. Evan C. Shortlidge, of Chester county, Pa., has been appointed physician to accompany the Friends' commission to the Indians of the Omaha Reservation. We understand that he is to receive a handsome salary and have his expenses borne.

The Titular Membership in the section of Pathological Surgery, in the Paris Academy of Medicine, vacant by the death of the celebrated surgeon, M. Velpeau, has been conferred, by a majority of votes of the Academy, on M. Verneuil.

Longevity.—Hippocrates died at the age of 109; Galen lived to be 104; Solon and Thales 100; Zeno 98; Diogenes 88; Plato 94; Lycurgus 85; Sophocles more than 100; Asclepiades also; Juvenal 100; Newton 85; Fontenelle 99; Buffon 81; and Voltaire 84.—*Med. Gazette.*

A Remunerative Journey for an Ophthalmologist.—Dr. Magni, Professor of Ophthalmology in the University of Bologna, Italy, is to receive a fee of 100,000 francs, about \$20,000 in gold, for an operation for cataract on a merchant residing in Lima, Peru. The expenses of the journey for himself and assistant are also paid by the Liman merchant.

A Lucrative Practice.—Le-po-tai, a Chinese "medicine man," sees some 700 patients, and enjoys an income of \$7,000 per week; at least so says a California exchange.

The Female Physician Question in Scotland.—The Edinburgh University Court has given its sanction to the matriculation of ladies as medical students, but with this condition, that separate classes shall be formed for their instruction. The assent of the General Council and of the Chancellor is necessary to give this concession the force of university law, but the *Scotsman* appears to consider the matter as virtually settled.

Lady Doctors.—Among the students who passed the most brilliant examinations at the Faculty of Medicine Paris there were three women—one French, one Russian and one American. The latter was especially well up in anatomy, dissections, pathology and operations.—*Med. Times and Gazette.*

Female Medical Education in Sweden.—It is announced that the Swedish Government purposes next year to establish a Medical College at Gothenburg. Ladies not under seventeen years of age may be admitted to a complete course, lasting three years, with clinical and anatomical lectures, &c., the graduates of this college being allowed to establish themselves as physicians all over the kingdom. The practice of midwifery is already almost entirely in the hands of women, and institutions for teaching it in all its branches have been long established.

A Distinguished Visitor.—Sir Henry Holland, now in his 82d year, formerly physician to the Queen and Prince Albert, and at a much earlier date (1814) to the Princess of Wales (afterwards Queen Caroline), is on his eighth or ninth visit to the United States. He has come over for the purpose of making a long excursion westward, extending to St. Paul, Minnesota. Sir Henry has professionally attended three intimate friends of Dr. Johnson—Mrs. Piozzi (Thrale), Sir W. Pepys, and Madame D'Arblay. He was the physician and friend of Campbell, Moore, Joanna Baillie, Rogers, Lord Grey, Lord Lansdowne, Lord Russell, Macaulay, Sydney Smith, Hallam and others.—*Ibid.*

Dr. Geo. M. Beard, writing to the *Med. Record* from London, says the following of American medical authors in Europe: "As one of the incidental objects of my visit was to make arrangements for the republication of my works in London, I have become somewhat acquainted with the leading publishers, and have had the curiosity to ascertain in regard to the transatlantic popularity of some of our best known writers in science. Hamilton's Treatise on Fractures and Dislocations is regarded here, as with us, as the supreme authority on the subject of which it treats. Both of Bedford's works have a constant and flattering sale."

Thomas's recently published treatise on diseases of women has already met with a good reception in England. Gross's Surgery, Bumstead's Venereal, the writings of Professors Flint (senior and junior), Dalton's Physiology, Dunglison's Medical Dictionary, Da Costa's Diagnosis, and Elliot's Obstetric Clinic, all meet with a good sale. Messrs. Trübner & Co. inform me that the popularity of American medical works is decidedly on the increase in England.

Scientific Evidence in Capital Trials.—Whilst a conviction for murder rests upon the evidence of one expert, or of one expert mainly, it will always be unsupported. Chemistry itself undoubtedly cannot err, but the best chemical manipulators may. No experiments, where a human life is at stake, ought to pass unchallenged, and we maintain that no jury ought to be required to decide on the evidence of a single expert. In every trial for murder the suspected articles ought to be sent to at least three toxicologists of undoubted rank, each of whom should be paid at the public expense, to make a separate examination. By such a plan alone will even the best chemical evidence be cleared from all suspicion of fallacy.—*Med. Times and Gazette.*

Mortality of Paris and the Provinces.—The following statistics, touching the proportion of illegitimate births in Paris during the year 1867, the latest on the subject, will perhaps have some interest for our numerous subscribers:

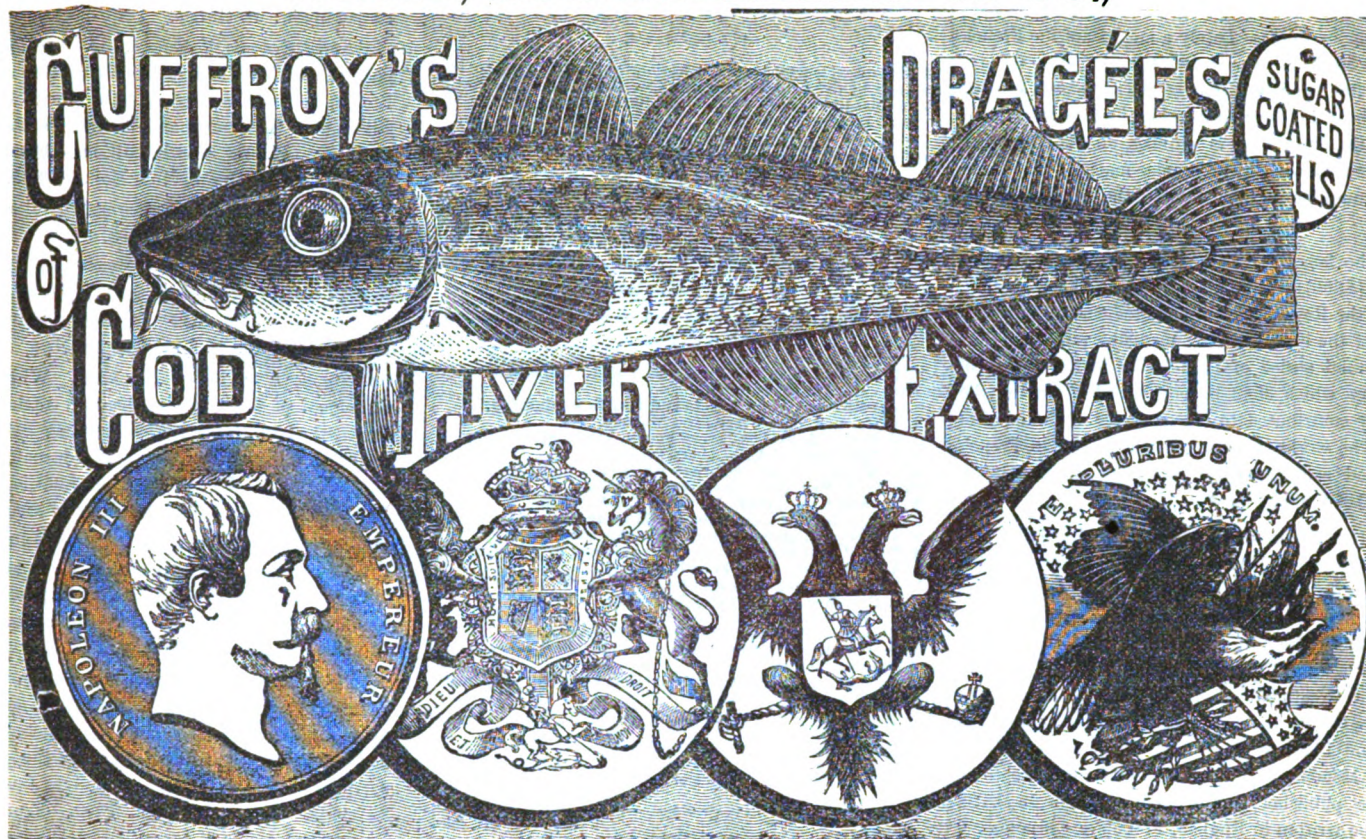
Legitimate children.....	39,572
Natural children	15,472

Total births in 1867..... 55,044

The proportion between the legitimate and natural children is as 2.56 is to one; or, in other words, there are born in Paris, for every one natural child, two and a half legitimate.—*New York Medical Record.*

WARD, SOUTHERLAND & CO.,

WHOLESALE DRUGGISTS,



130 WILLIAM STREET, New York.

AN EFFICACIOUS REMEDY FOR COUGHS, COLDS, CONSUMPTION, CONSTIPATION, DYSPEPSIA, SCROFULA, AND GENERAL DEBILITY.

In general use by the Med. Faculty in this country and Europe, to the exclusion of Cod Liver Oil.



Bulletin de l'Académie Impériale de Médecine.

SEANCE DU 21 Octobre, 1862.—Vol. 28.

The introduction of Cod Liver Extract, a substance possessing the same efficiency, but without the various inconveniences of Cod Liver Oil, from the richness of its chemical composition, its efficiency and certainty of action, the possibility of administering it to the most fastidious in doses of well ascertained and easily regulated strength, is a real service to medicine.

Report of MM. BOUILLAUD, FOGIALE & DEVERGIE, Committee.

The Gazette Officielle de Médecine de St. Petersburg, July 18, 1864, says:

We beg all the newspapers in the Empire to publish this important discovery, for it is one of peculiar value to Russia, where more Cod Liver Oil is used than in any other country.

The Imperial Medical Council of St. Petersburg officially recognize Cod Liver Extract, and authorize its use in Russian Hospitals, from trials under the auspices of J. KALENTROHENKO, Professor of Medicine in the University of Karkov.

Mr. GOWLAND, Surgeon, St. Mark's Hospital, published cases of Fistula in Consumptive patients, requiring extensive operations where Cod Liver Extract accelerated the healing, and improved the health and condition of the wounds, after Cod Liver Oil had not only nauseated the patient but had signally failed to produce the slightest effect.

Cod Liver Extract is a very valuable medicine, and its introduction an important service rendered to medicine.

Lisle, 15th July, 1863. PARISSE, M. D.

I have now tried your Dragées on about twenty of my patients, and have to express myself well pleased with the uniformly favorable results following their use.

HERSCHELL, M. D.
Paris, 18 Rue Laftite, 15th Dec., 1864.

We are satisfied that it is qualified to take the place of Cod Liver Oil, and that it can be prescribed with the certainty of never being objected to by patients on account of its nauseating effects.

Article of Dr. B. MARTIN in the *Courier Medical*, May 14, 1864.

SEE WHAT THEY THINK OF IT.

These Pills are unquestionably a genuine preparation, and not an imposture, like the Cod Liver Oil Powder examined by Dr. ATTFIELD.

Chemical News, London, Dec. 1, 1865.—Editorial.

In cases where Cod Liver Oil cannot be taken or borne the Dragées come in most efficiently, and are, in truth, excellent substitutes.

Social Science Review, London, Jan. 1, 1866.—Editorial.—Dr. B. W. RICHARDSON.

Case of Henry Mallon, admitted May 18, 1867, and discharged June 13, 1867 (less than one month), in which the Dragées alone were used. He had a cavity in the upper lobe of the right lung and softening tubercles in the summit of the left. He improved in general condition very rapidly while in the hospital, and after he left. We use the Dragées when the oil nauseates, and they seem to act in as beneficial a manner as the Oil would if it had agreed with the patient's stomach.

St. Luke's Hospital, New York City, Feb. 28, 1868.

A. A. DAVIS, M. D., Resident Physician.

I have used your Dragées in very many instances where Cod Liver Oil could not be retained, and find them useful adjuncts. I have administered them in some cases of constitutional and secondary syphilis with very beneficial results.

Bellevue Hospital, New York City, Feb. 27, 1868.

CHARLES YOUNG, M. D., Resident Physician.

We have used GUFFROY'S Cod Liver Dragées in many cases where the patients were very much debilitated, and could not retain the Oil, and the patients were very much benefited. We believe that they contain the nutritive and medicinal properties that such patients require.

Home Dispensary, Bond Street, New York.

C. E. CAMPBELL, M. D.

Cod Liver Dragées are finding great favor among our first physicians, many of whom have prescribed them, and it is truly a very valuable medicine.

Office, St. Assayer, Portland, Maine.

H. T. CUMMINGS, M. D.

I have had remarkable success in cases where I used your Cod Liver Dragées, and am satisfied that it is the best form in which the Cod Liver has ever been administered.

Shoreham, Vt.

E. P. SQUIRE, M. D.

A case for the trial of your Dragées came up in a patient who had grown so low and feeble as to render a speedy death very probable, as he had lost all appetite, was greatly emaciated, and could not take Cod Liver Oil. I administered the Dragées, and in a few days there was a marked improvement. I increased the dose, my patient improving all the time, and he was soon so far recovered as to attend to his ordinary avocations.

Woodstock, Ky.

W. H. BENTLEY, M. D.

HAGERSVILLE, Bucks Co., July 14, 1869.

Messrs. WARD, SOUTHERLAND & Co.:

* * * I have had remarkable success with your Dragées of Cod Liver Extract, in two cases of Phthisis, one of which is perfectly cured, the other in a good way of recovery. I find it superior to any other preparation of Oil. Yours, etc.

J. K. RICE, M. D.

NEWBURN, Va., July 15, 1868.

Messrs. WARD, SOUTHERLAND & Co.:

* * * I have prescribed your Dragées of Cod Liver Extract in a great many cases, and I have secured results from their use that I could not have obtained from Cod Liver Oil.

W. H. BRAMBLITT, M. D.

NEW METAMORPH, Wash. Co., O., July 20, 1869.

Messrs. WARD, SOUTHERLAND & Co.:

* * * I have never seen so marked an effect from the use of Cod Liver Oil in any case as with your Dragées. I think them almost a specific even in cases of scrofulous tuberculosis.

A. R. ANDERSON, M. D.

Messrs. WARD, SOUTHERLAND & Co.:

* * * I have used Guffroy's Dragées in two cases successfully, and am convinced that they are the best remedy in the first stages of Consumption that can be used. Enclosed please find Two Dollars for another box. I wish them a large circulation.

Yours truly,

A. R. ANDERSON, M. D.

PRICES.—Box of 60 Dragées, equal to one and a half pints of Oil, 75 cents; box of 120 Dragées, \$1.25; box of 240 Dragées, \$2.00. Sent (Post-paid) by Mail, on Receipt of Price.

Physicians having cases where Cod Liver Oil is indicated, will obtain better results by the use of the Dragées than with Cod Liver Oil. For full particulars, containing Medical Societies' Reports, Physicians' Certificates, etc., send for Pamphlet to WARD, SOUTHERLAND & CO., Wholesale Agents, 130 William St., New York.

Miscellaneous.

Experiments on Cattle.—Lately a member of the French Academy of Medicine, a partisan of the infection theory, bought four fine healthy heifers of the same age, and fed to three of them in their food tubercular matter taken from cattle that had died of phthisis, and to the other one the same food without tubercular matter. The three died of consumption in four months, the other is living and well.

Prize.—The famous Riberi prize, to the amount of 20,000 libri (£800), will be distributed for the third time in 1871, by the Royal Academy of Medicine of Turin, to the author of the best work on medicine published during the triennial period of 1868–70, or to the author of the discovery which shall be considered as having the most largely contributed to the progress of the medical sciences. The works must be written in Italian, French or Latin, and sent in to the Academy on the 31st of December, 1870, at the latest.

Prizes.—The Editor of the *American Journal of Obstetrics and Diseases of Women and Children*, offers the following prizes (in gold) for essays: \$50 for the best essay on "Catarrh of the Uterus, its Etiology and Treatment;" \$100 for the best essay on "The Morbid Anatomy of the Placenta;" \$50 for the best essay on "Electricity in the Treatment of the Diseases of Infants and Children;" \$100 for the best essay on "Congenital Deformities and Diseases depending on Maladies of the Uterus or Membranes." The first and third are to be sent to the publishers on or before March 15, 1870. They may be written in English, French or German.

The Barbier Prize.—This prominent prize of the Paris Academy (for any precious discovery in medicine, surgery or pharmacology) was divided between M. Fraser, for a profound study of the plant which gives the Calabar bean—the *physostigma venosum*—and M. Rabuteau, for experiments to define the physiological action of certain metallic compositions—the fluorides, the iodates, the iodides, the bromates and the bromides.

Professor Ercolani receives the Godard Prize.—The Godard prize of the Paris Academy was lately given to Professor Ercolani, of Bologna, for interesting researches on the glandular organs.

Prizes.—The Académie de Médecine de Grenade offers a prize gold medal and the title of corresponding member to the authors of the best essays on, I, "The Identity or Duality of the Syphilitic Virus," and II, "The Prophylaxis of Pulmonary Phthisis." Memoirs, written in Spanish, Latin, French or Portuguese, may be addressed to the Secretary until Oct. 30 next.

A Large Prize awaiting a Claimant.—For the last fifteen years a prize of 100,000 francs (20,000 dollars) has been awaiting the happy discoverer of a cure for Asiatic cholera, but the French Academy of Sciences has not been able to award the important prize; but it voted the interest in encouragements, one of which went to Dr. Lorain, for having saved the lives of several choleraic patients by the injection of warm water into their veins.

A Prize of 2,500 Francs Awarded.—The French Academy of Sciences has awarded Dr. Villemain, of the Val-de-Grace, a prize of 2,500 francs for his researches into the inoculation of the tubercle of pulmonary consumption.

Prizes Awarded by the French Academy of Sciences.—Drs. Felz, Austin Flint, Jun., of New York, and Raciborski, were each voted prizes of 1,500 francs, the first for "New and Remarkable Observations on the Capillary Blood Clots;" the second for "Experimental Researches on a New Function of the Liver;" and the third for his excellent treatise on "Menstruation."

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Uterine Displacements and Affections of the Spine treated successfully by the BANNING System of Mechanical Support, Spinal Abdominal Braces, Army Brace for Hernia, Symmetrizers, etc. Surgical Diseases a specialty.

Dr. E. P. BANNING, Jr.,
Late Associate Physician of the Banning Institute
of New York.

Dr. C. L. GREEN,
Late Passed Assistant Surgeon, U. S. Navy.

SEND FOR PAMPHLET.

Days of Meeting

OF THE SEVERAL MEDICAL SOCIETIES OF NEW YORK, BROOKLYN
AND VICINITY.

N. Y. Acad. of Med., the First and Third Thursday of every month, except in the summer.
N. Y. Path. Soc., every Second and Fourth Wednesday.
N. Y. Co. Med. Soc., every First Monday.
N. Y. Medico-Legal Soc., every Fourth Thursday.
N. Y. Med. Journal Assn., every Friday.
N. Y. Medico-Forensic Soc., every First and Third Wednesday.
East River Med. Asso., every First Tuesday.
N. Y. Obstet. Soc., every First and Third Tuesday.
N. Y. Ophthal. Soc., every Second Monday.
N. Y. Medico-Hist. Soc., every Third Tuesday.
N. Y. Med. and Surg. Soc., every Second and Fourth Saturday.
N. Y. Med. Asso., every Fourth Monday.
N. Y. Med. Union, every Second Saturday.
Bell. Hos. Med. Union, every Thursday.
Am. Microscop. Soc., every Second and Fourth Tuesday.
O. E., every Thursday, from Nov. to March.
Society for Reporting the Progress of Medicine, every Second and Fourth Thursday.
Phys. Mut. Aid Soc., Annual Meeting First Saturday in November.
Dist. Med. Soc., Co. Hudson, every First Tuesday.
Med. Soc., Co. Kings, every Third Tuesday.
Newark Med. Asso., every Third Tuesday.
Med. Soc., Co. Queens, last Tuesday of May and November.
Med. Asso., Eastern District of Brooklyn, every Third Thursday.

DIED.

TOWNSEND.—Dr. SOLOMON D. TOWNSEND, M. D., who died in Boston, Mass., on the 19th ult., after a brief illness of only a few hours' duration, was the son of the late Dr. David Townsend, and was born in Boston on the 1st of March, 1793. His father was a well known physician of that city, and after serving in the Army of the Revolution, was, during the greater part of his professional life, Surgeon of the Naval Hospital in Chelsea, and held other offices of trust and distinction. Dr. Townsend was graduated at Harvard College in 1811, a classmate of Hon. Edward Everett, Rev. Dr. Frothingham, Chancellor Dunkin, of South Carolina, and other well known Alumni. Having completed the study of medicine, he entered the service of the United States as a naval surgeon, and in that capacity spent three years of his early life. While serving in the Mediterranean his friendship began with Admiral (then midshipman) Farragut—an intimacy the remembrance of which he always fondly cherished. He was for many years one of the surgeons of the Massachusetts General Hospital, where his beautifully finished marble bust now stands as a memorial of his kind and skilful services to the poor who came under his care.

ROGET.—PETER MARK ROGET, F. R. C. P., the distinguished physician whose death is just announced in London, was a Fellow of the Royal Society and of the Royal College of Physicians. His father was the minister of a Swiss church in London, and married the sister of Sir Samuel Romilly. Dr. Roget is best known by his "Thesaurus of English Words and Phrases," and his contribution to the Bridgewater Treatises on "Animal and Vegetable Physiology." He wrote various mathematical papers, and contributed largely to the medical and philosophical reviews. For some time he held a Professorship of Physiology at the Royal College. He was ninety years of age.

GALLIGO.—At Florence, Dr. GALLIGO, aged 47 years. In Dr. Galligo the Italian medical press has lost one of its most liberal, enlightened and energetic members. This author was so highly connected with men of science, that he was especially sent to the International Congress of 1867.

CARUS.—The illustrious anatomist, CARUS, died at Dresden, the 28th of July, at the age of 80.

Books, Pamphlets, &c., Received.

Niemeyer's Text-Book of Practical Medicine. In two volumes. Translated from the German by Drs. HUMPHREYS and HACKLEY. D. Appleton & Co., New York. 1869.

Meyer's Electricity in its Relations to Practical Medicine. Translated from the German by Prof. HAMMOND. D. Appleton & Co., New York. 1869.

Politzer on the Membrana Tympani in Health and Disease. Wm. Wood & Co., New York. 1869.

Sources of Longevity, its Indications and Practical Applications. Wm. Wood & Co. 1869. From the American Popular Life Insurance Company.

Erchen's Surgery. From the Fifth English edition. Edited by JOHN ASHURST, Jr., A. M., M. D., etc. Philadelphia: H. C. Lea. 1869.

Concentrated Organic Medicines; being a Practical Exposition of the Therapeutic Properties and Clinical Employment of the Combined Proximate Medical Constituents of Indigenous and Foreign Plants. By GROVER COE, M. D. Tenth edition. From the Publishers, B. Keith & Co., New York. 1869.

Third Annual Report of the Metropolitan Board of Health of the State of New York. 1868.

Glaucoma. Read before the New York State Medical Society, at the Annual Session, February, 1869. By HENRY D. NOYES, M. D., Prof. of Ophthalmology in Bellevue Hospital Medical College, New York.

Electricity as a Means of Diagnosis. With a Tabular Statement of 500 cases of diseases treated mainly by the method of General Electrization; being a paper read before the New York Med. Journal Association, October, 1869. By A. D. ROCKWELL, A. M., M. D., Fellow of the New York Academy of Medicine, etc.

Therapeutical Skepticism; an Address, Introductory to the Course of 1869. By JOHN V. LANSING, M. D., Professor of Materia Medica and Physiology, Albany Medical College. Published by the Class. From the printer, Joel Munsell, Albany, N. Y.

A Guide to the Fortifications and Battle-fields around Petersburg; with a splendid Map, from actual surveys made by the U. S. Engineer Department. Prepared and published as a Hand-book by the proprietor of Jarratt's Hotel. Sent to any address upon receipt of 25 cents. Petersburg, Va., 1869. From Philip F. Brown, Proprietor of Jarratt's Hotel, Petersburg, Va.

The New Orleans Journal of Medicine, Oct., 1869.

Good Health, Nov., 1869.

Report and Remarks on a Third Series of One Hundred Cases of Cataract Extraction by the Peripheric Linear Method, by H. Knapp, M. D., late Prof. of Ophthalmology, and Surgeon to the Ophthalmic Hospital at Heidelberg, etc.

Physician's Visiting List for 1870. From Lindsay & Blakiston, Philadelphia.

The National Quarterly Review, edited by EDWARD I. SEARS, LL.D., Sept., 1869, N. Y.

Vital Resources; or How to Become Physiologically Younger and Stronger. By JEROME KIDDER, M. D. New York: 1869. Pp. 165. \$1.50.

Price List of Microscopical Instruments. F. H. MCALLISTER, 49 Nassau street, New York.

Medical Observations published in France, on the Use of Matico (Hiper Angustifolium Peruvienne) in the Treatment of Acute and Chronic Bleorrhoea, Leucorrhoea, etc., etc. Grimault & Co., Operative Chemists, 45 Rue Richelieu, Paris. Central Agency, 53 Murray Street, New York.

A Catalogue of Medical Books, etc., for sale by Wm. Wood & Co., New York.

Catalogue of the Medical Publications of Henry C. Lea, Philadelphia.

Catalogue of the Medical Publications of Lindsay & Blakiston, Philadelphia.

Catalogue of D. Appleton & Co.'s Publications, New York.

Zell's Popular Encyclopædia and Universal Dictionary. Nos. 10 & 11. Edited by L. Colange. Philadelphia: T. Elwood Zell. 1869. Issued in Monthly Parts, of Five Numbers, at 50 cents. New York Agency, 7 Murray street.

Iuka Mirror. Published by M. A. SIMMONS, M. D.

Bachman's Carbonic Pain Absorber. See advertisement *Albany Morning Express*, and the Exchanges announced in August. Digitized by Google

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FIG. 15. THE COMPLETE STEAM ATOMIZER. (New.)

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All its joints are hard soldered.
It cannot be injured by exhaustion of water, or any attainable pressure, and will last for many years.
It does not throw out spirits of hot water; is convenient, durable, portable, compact and cheap, in the best sense of the word. Can be carried from house to house without removing the Atomizing Tube or the water.

Price, \$6 00.

Neatly made, strong, Black Walnut Box, with convenient Handle, additional,

\$2 50.

Each of the above Apparatus is supplied with two carefully made annealed glass Atomizing Tubes, and accompanied with directions for use. The Steam Apparatus is tested with steam, at very high pressure. Each Apparatus is carefully packed for transportation, and warranted perfect. Also,

Hand Ball Apparatus, Fig. 5 (without shield), with two Glass Tubes.....	\$4 00
Silver Plated Tubes, for Local Anæsthesia and for Inhalation, each.....	2 00
Rhigolene, for Local Anæsthesia, best quality, packed.....	1 00
Nasal Douche, for treating Diseases of the Nasal Cavity; eight different varieties, each with two Nozzles, packed.....	\$1 20, 1 50, 2 00, 2 50 and 3 50

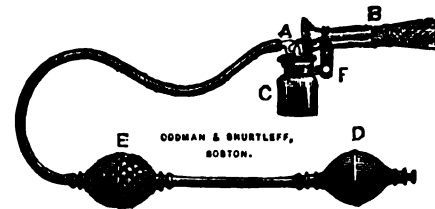


Fig. 5. SHURTLEFF'S ATOMIZING APARATUS.

(Patented March 24, 1868.)

The most desirable Hand Apparatus.
Rubber warranted of very best quality. Valves of hard rubber, every one carefully fitted to its seat, and work perfectly in all positions.

Price, \$4 50.

The Bulbs are adapted to all the Tubes made by us for Local Anæsthesia in Surgical Operations, Teeth Extraction, and for Inhalation. (For description of Tubes, see pamphlet.)

A PAMPHLET containing two Articles, by distinguished Foreign Authority, on "INHALATION OF ATOMIZED LIQUIDS,"

WITH FORMULÆ OF THOSE SUCCESSFULLY EMPLOYED.

Also, an Article by Dr. J. L. THUDICHUM, M. R. C. P., on
"A NEW MODE OF TREATING DISEASES OF THE NASAL CAVITY,"
WITH HIS FORMULÆ.

Also, an Illustrated Description of the Best Apparatus for the above purposes, and for producing Local Anæsthesia by Atomization with Ether, by the method of Dr. RICHARDSON, of London; or with Rhigolene, as described by Dr. HENRY J. BIGELOW, in the *Boston Medical and Surgical Journal* of April 19th, 1866, will be sent by mail (post paid) on application.

A GOLD MEDAL has lately been awarded us by the Middlesex Mechanics' Association, for Atomizing and Surgical Instruments, as will be seen from the following report, signed by a leading New England Surgeon and Physician:

"1503. Codman & Shurtleff, Boston, Mass. One Case Surgical Instruments and Atomizers.

"The Committee have no hesitation in awarding for this superb exhibition the highest premium. * * * * * The various other Instruments for Inhalation of Atomized Liquids, and for Local Anæsthesia, were all apparently faultless, both in design and workmanship. The exhibitors are regarded as more especially deserving of the highest token of merit for having produced nothing except of their own manufacture.

GOLD MEDAL.

("Signed),

GILMAN KIMBALL, M. D., *Chairman.*"

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Cammann's Stethoscopes, Disarticulating.....	\$7 00 to \$8 00	*Dr. Cutter's Simple Prolapsus Pessary.....	\$3 00
" " " Improved.....	8 50	" " Pessary for Flexions.....	3 00
" " " Knight's Modification.....	9 50	French Rubber Urinals, with valves, male, for night or day.....	6 00
Simple Throat Mirrors.....	1 00	" " " male, day only.....	2 50 to 4 00
Ophthalmoscopes, Liebreich's.....	6 50 to 7 00	" " " female.....	3 00
Holt's Dilator, Improved.....	20 00	*Vaccinators, Whittemore's Patent Automatic, for Crust or Lymph fresh from arm. Its operation is instantaneous, certain, and nearly painless (post paid).....	3 00
Barnes' " set of three, with Inflator and Stop-cocks.....	7 50	Laryngoscopes, complete.....	18 00 to 28 00
Large Ear Mirrors, Trölsche's.....	4 50 to 5 00	*Dr. Oliver's Laryngoscopic Lantern.....	4 00
Hypodermic Syringes.....	3 50 to 15 00	" " " with Auto-Laryngoscopic Attachment.....	5 00
*Miller's Intra-Uterine Scarificator (in case).....	7 00	Laryngoscopic Mirrors, in case.....	9 00
Lente's Intra-Uterine Caustic Instruments.....	8 00	*The Storer Speculum.....	6 00
Pinkham's Intra-Uterine Scarificator, Improved (in case).....	8 00		
*Dr. Cutter's Retroversion Pessary.....	3 00		

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Trusses—Spinal and Abdominal Supporters—Shoulder Braces—Suspensory Bandages—Elastic Hose—Medicine Trunks and Pocket Medicine Cases—Otosopes—Endoscopes—Dr. Sayre's Splints for Hip-Joint Disease—Fever Thermometers—Respirators—Syringes—Crutches—Universal Syringes—Galvanic Batteries and Apparatus—Uterine Sponge Tents—French Conical and Olive-tipped Bougies and Catheters.
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GOLD MEDAL for best quality at the Exhibition of Paris, 1867.
One pound contains the soluble parts of 45 pounds of English Butcher's meat.

Keeps Unaltered for Years in any Climate.

BOUDAULT'S PEPSINE,

SUPERIOR to all other PEPSINES made, having been honored with the

ONLY GOLD MEDAL

Awarded to this Special Article at the International Exhibition, at Paris, in 1867.

In order to maintain the high, deserved reputation of BOUDAULT'S PEPSINE, none is delivered to commerce before it is physiologically tested by artificial digestion, so as to secure a product possessing always the same requisite digestive power.

Physicians and Druggists in want of a reliable PEPSINE, (see art. Pepsine, *U. S. Dispensatory*), will do well, when ordering, to specify BOUDAULT'S PEPSINE, in powder, or his ELIXIR, WINE, SYRUP, or LOZENGES of PEPSINE, as there are similar preparations sold, which hardly deserve the name of PEPSINE.

RAQUIN'S CAPSULES.

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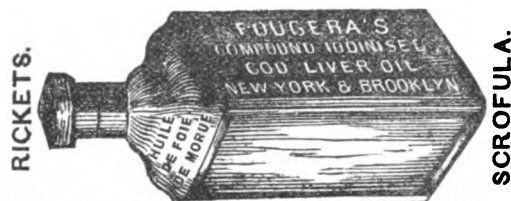
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Original Articles.

Laryngoscopy Made Easy.—The Pocket Laryngoscope.

BY DR. ELSBERG,

Clin. Prof. of Diseases of the Throat in the University of New York.

The laryngoscope has accomplished wonders. The method of its employment is hardly a dozen years old, and it can show practical results unsurpassed in the history of any department of medicine. The introduction of auscultation and percussion, as to heart and lung diseases, or of ophthalmoscopy as to diseases of the internal structures of the eye, which may be compared to it in regard to the revolution it achieved in diagnosis, is left in the shade when the direct aid to treatment is taken into consideration. The great merit of laryngoscopy is, as has been before pointed out, that it has entirely changed the field of laryngeal therapeutics; that it has made of an internal, invisible and intangible organ one which is now, as it were, external, at all events visible and within the reach of touch. The feats of laryngoscopic surgery which have been performed recently exceed not only everything that could have been conceived of in ante-laryngoscopic times, but even "the most sanguine expectations" of the early cultivators of the method.

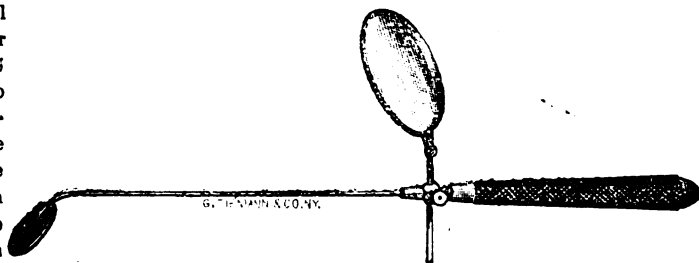
But—and for the credit and the success of the profession at large, and the best interests of patients, it is a serious "but"—in one respect just expectations have been disappointed. While the use of the laryngoscope has been brought by the few to a state of relative manual perfection, and while there is perhaps no regularly educated physician in the land who has not heard of the instrument, the consummation wished for years ago, viz., "its common employment in the round of daily practice in every case requiring its aid," is still unrealized.

What is the reason of this failure? Are the inherent difficulties of laryngoscopy so great that the general medical practitioner cannot avail himself of it? Must every patient who cannot consult a specialist be necessarily debarred from the benefits of laryngoscopic medication—a medication which has been authoritatively pronounced "the most important improvement recently made in practical medicine?"

No! *The performance of laryngoscopy is generally as easy as, if not more easy than, the performance of any one of the methods of physical examination which a physician would be ashamed not to have mastered, at least to some extent.* Of course there are exceptional cases, which require, particularly for operative treatment, special skill; but no general practitioner, who claims to practice his profession conscientiously, is at this day excusable if he has never seen the interior of the living larynx. It is not as difficult in most cases to obtain a view of the vocal cords as it is to determine an abnormal condition of the heart or lungs by auscultation

and percussion, or to sound for stones in the bladder, or to diagnose any one of the deep seated affections of the eye, or even to recognize morbid changes of the membrana tympani by the ear speculum. Patients requiring laryngoscopic examination present themselves in general practice far more frequently than those who must be subjected to any one of the other methods of physical exploration mentioned; and, although the patient has no right to expect a physician adept in every medical specialty, it is the physician's bounden duty to be at least able to apply the established proper means of examination in every case that he accepts to take care of. I could go further and assert that no physician has a moral right to keep under his charge a patient suffering from some important disease belonging to a class which has developed into a specialty, if he understands nothing of that specialty, and if another physician is within reach of the patient who does, or to withhold from the patient the knowledge that another physician, accessible to him, could treat the case more effectually. And self interest, if no other motive, should induce an honest general practitioner to make himself, to some extent at least, practically acquainted with so indispensable an auxiliary as laryngoscopy in diseases which are so common in this country.

Every attempt to simplify the instruments, and to facilitate the performance of laryngoscopy for general purposes, should be hailed as a benefit to the profession at large; and I desire in this connection to mention with especial honor the names of Dr. Ephraim Cutter, of Boston, and Dr. L. Waldenburg, of Berlin. The former first showed how easily a few rays of sunlight, shining anywhere within or just outside of a room, can be thrown, by a small piece of ordinary looking-glass, properly held, into a patient's mouth; or, if his position is not a convenient one, how the rays may be collected on one looking-glass and by a second one directed into his mouth, wherever he sits. The latter has invented a simple spectacle frame, carrying two reflectors, which can be directed upon the same spot, and throw light from any source, natural or artificial, into the oral cavity. Both in so far simplify laryngoscopy as they illuminate the back of the mouth; for it must be understood that, with the fauces well illuminated, the little laryngeal mirror to be introduced into the mouth alone constitutes the laryngoscope, and is the only instrument which is necessary for simple laryngoscopy. I have devised, a long time ago, a "pocket laryngoscope," of which—though a large number of physicians have seen, and many procured and used it—no account has ever been published.



It is sufficiently clearly represented in the wood-cut. It is composed of a small round mirror, $\frac{3}{4}$ of an inch in diameter, made of glass, with a deposit of silver on the back, and carefully mounted in metal, attached at an

* See Preface to Laryngoscopic Medication; or the Local Treatment of the Diseases of the Throat, Larynx and Neighboring Organs under Sight. By Louis Elsberg, A. M., M. D., etc. New York: William Wood & Co. 1864.

angle of 45° to a strong wire, $\frac{1}{8}$ of an inch thick and 6 inches long, which is firmly held by a long, finely threaded screw, in a strong $\frac{1}{2}$ inch thick handle, 5 inches long; this handle carrying a silvered glass reflector, 3 inches in diameter, of $4\frac{1}{4}$ inches focus, not pierced in the centre, movable in all directions. Though not absolutely necessary, a ring shaped handle may be attached to the back of the reflector, by which the index finger can move it with great ease and precision.

By attention to the detailed direction I am about to give as to the employment of this instrument, *every physician can learn, with ten minutes' practice, to perform laryngoscopy in all ordinary cases.*

I will first suppose the examination is to be made in the day time, in the absence of direct sunlight. Seat the patient with his back to the window, let him open his mouth and protrude his tongue by a strong effort of will, and let him hold the tongue out with the index finger and thumb of his right hand, covered by a handkerchief. As I want to give minute practical directions, I must say here that a great deal of awkwardness is prevented by placing the handkerchief between the middle and index fingers, turning it over so as to cover the index finger and thumb spread far apart, and closing the little and ring finger upon the handkerchief; the thumb and index finger then taking hold of the tip of the tongue, the thumb should rest against the chin, and by an outward and downward movement arch out the tongue. When the patient does not succeed in properly holding out his tongue, the examiner must hold it with his left hand. The little mirror is warmed until the film of condensation which settles upon it passes off; its temperature may be ascertained by bringing its metallic back into contact with the examiner's cheek or the back of his hand; it is then, without touching the tongue, introduced into the mouth, taking the uvula upon its back. Keeping the parts well illuminated by means of the reflector, on depressing the handle a little, the epiglottis will be seen in the mirror; and getting the patient to breathe deeply, say "a," laugh "hah, hah, hah!" as heartily as possible, &c., and very slightly moving the handle, the various parts of the interior of the larynx and neighboring organs will be brought into view.

When artificial light has to be employed, the patient should sit so that it is a little back of him, and on his right side. In all other respects the mode of examination is unchanged. The pocket laryngoscope may be used with sunlight, or diffuse day light or oil lamp, candle or gas light; and in the latter case the ordinary high gas fixture answers the purpose almost as well as a drop light or stand. Ten minutes' practice familiarizes any one with its use.

For auto-laryngoscopy an extra looking-glass is necessary which, when the mouth can be illuminated by direct sun or artificial light, may be in the handle instead of the reflector; otherwise, it must be placed in any convenient manner in front of the examiner.

When the tongue is too short and thick to be well protruded, or when the mouth from any cause cannot be held widely enough open, my "oral speculum," or mouth gag, is of great use in conjunction with the pocket laryngoscope.

Without the mirror, the instrument may also be used for otoscopic and ophthalmoscopic examinations.

The Pathology of Cataract.

BRING AN ABSTRACT OF A DIDACTIC LECTURE DELIVERED IN THE NEW YORK OPHTHALMIC AND AURAL INSTITUTE, JAN. 22D, 1870.

BY H. KNAPP, M. D.,
LATE PROFESSOR IN THE UNIVERSITY OF
HEIDELBERG.

Cataract, studied on the living body in all its particulars, puzzled pathologists greatly, owing to the scarcity of structural changes which they were able to detect in

extracted opaque lenses. Under the microscope the most fully developed specimens show no appreciable alterations in the capsule, epithelium, fibres, and nuclei of the lens. We can only account for that by taking into consideration the peculiar way in which the crystalline is nourished. Being suspended in liquid substances, and having no blood vessels, its *nutrition depends solely on endosmosis and exosmosis*. Its pathology, therefore, must be governed also by the physical laws of the *diffusion of liquids*.

This principle has not been appreciated by pathologists, and for that reason there is no satisfactory description of the pathology of the crystalline lens in any text-book on ophthalmology. *Stellweg* heads his rather confused chapter on the nosology of the crystalline with the words: "*Cataract and atrophy of the lens are synonymous expressions.*" This assertion is not correct. A soft cataract of a young or middle-aged man, does not exhibit any signs of atrophy. All the elements of the lens are well preserved, and even larger than in ordinary lenses. In hard senile cataract, the fibres appear flattened to a greater extent than we see in the normal lens; but, nevertheless, they are complete in number, and it is in vain that we look for notable structural changes.

Let us, since the microscope fails to reveal any remarkable alterations, now consider both kinds of cataract, and see what conclusions may be derived from the peculiar physiological conditions of nutrition of the crystalline body. The following sentence may be premised as constituting the essence of the whole subject, viz.: *Hard cataract results from a deficiency, soft cataract from a surplus of water in the crystalline lens; all other varieties of cataract are degenerative processes consequent on an abnormal amount of water within the lens.*

Hard cataract occurs in advanced years, when most tissues are shrivelled and more or less dried. This being most marked in the skin, let me remind you that the crystalline body develops from the common integument. I am unable to explain why not all old persons suffer from cataract. I simply state that senile cataract is not atrophy of the lens, but want of water in its tissue, rendering the latter opaque by unequal exsiccation of its different components, thus destroying the homogeneity of substance requisite for transparency.

Soft cataract occurs in youth, when all the tissues of the body are well impregnated with water. Its bulk is increased, without multiplication or hypertrophy of its solid constituents. Laceration of the capsule will in the shortest time produce this form of cataract, by imbibition of the lens substance with water. Diabetes mellitus is very apt to cause soft cataract, never hard cataract, which fact may be thus accounted for. Sugar has been demonstrated in the lens tissue by *Prof. Carius*, on my request, in several diabetic cataracts I had extracted, and subsequently by others. The endosmotic equivalent of sugar, according to Dutrochet, is 7. 1. If, by some changes in the disease, the quantity of sugar in the blood diminishes, the aqueous and vitreous humors being in immediate contact with the blood vessels, will lose sugar rapidly. Then the lens will give out its sugar by taking in its stead a seven times greater quantity of water. The experiments of *Kunde*, that frogs, when put in salt water, get cataract, may be interpreted according to the same principles.

The increase of water of soft cataract will mostly disappear at a later period. More or less disintegration or degeneration of the lens substance will be the natural result. After the absorption of the water, the solids may remain as fatty, earthy, or albuminous concretions—disciform, adipose, chalky, membranous cataract. A process of formation of connective tissue, with petrification, perhaps ossification, may ensue—*cataracta fibrosa, fibro-capsularis, cretacea, ossea*; which, by irregular accumulation and shrinking, assume a nodular form—*cataracta siliquosa*.

A prevailing amount of liquids, on the contrary, may remain behind, the solid components of the lens being broken up, and swimming as irregular concretions in the emulsive fluid—*cataracta lactea, liquida, cystica*. *Decomposition*, also, sometimes takes place in the whole or part of the crystalline—*cataracta putrida*.

The lecturer entered more fully into the histological and histogenetic details of these different forms of cataract, pointing out, at the same time, their prognostic significance, and gave many useful hints concerning treatment and operations. The most striking alterations, such as formation of connective tissue, calcareous deposits, etc., were shown before and after the lecture by microscopic specimens.

Communication from F. H. Hamilton, M. D., Professor of Surgery of the Bellevue Hospital Medical College.

Samuel Robinson, Aet. 53, native of U. S., druggist; admitted to one of the surgical wards under my care, on the 3d December, 1869.

His parents were "first cousins." Patient's one sister and three maternal aunts died of consumption. His mother died of hemiplegia. Father and grandfather, both had epilepsy. A paternal aunt had dropsy (ovarian?), and another is said to have cancer. Patient's brother, had a few attacks of hæmoptysis. Another brother has been sickly for the last 25 years, and 9 out of his 11 children died quite young. Patient has been subject to "shortness of breath" and palpitation of heart; has fistula in ano, but lungs and heart are healthy.

While a school-boy fell down and broke his left forearm at the elbow-joint. The separated olecranon process can be pushed to and fro. About two years afterwards broke the right elbow at same place. Separation at right elbow twice as much. Some time afterwards broke his left clavicle. December, 1854, fell on the ice and broke both bones of right leg, just above ankle, which united in three months. January, 1858, slipped on the ice and broke his right tibia at upper third. Two years ago, last April, stepping on a piece of fruit skin, slipped and broke his left leg, between the lower and upper third, which united with slight deformity, December, 1868, while standing at the corner of a street a friend slapped him on the shoulder, which was enough to knock him down and break his right thigh, just above the knee; this also united in a short time, but it was shortened two inches. Callus still can be felt. Four years ago was set upon by some rowdies and had three of his ribs broken.

While getting out of a Third Avenue car dislocated the head of left femur by the most trivial cause, and while lying on the sidewalk astonished the bystanders by turning on his right side, and reducing the dislocation himself. The same thigh was dislocated while pushed by a man, and reduced it in the same way.

Two of his paternal uncles had each a leg broken, and one an arm besides.

One of patient's sisters broke bones of her leg. Patient thinks she or another sister had a collar bone broken.

A younger brother, Aet. 40, had his right leg broken twice below the knee. The same brother broke his right arm near the wrist twice; had his elbow broken at the joint over 20 years ago, which is enlarged and ankylosed; and a few years ago dislocated the knee joint and was not reduced, thus crippling him for life. Patient's father broke both fore arms at elbow joint. On the mother's side no one, as far as patient remembers, is subject to fragility of the bones.

Patient has arcus senilis very marked, encircling the whole cornea. Never had lead colic or any other symptoms of lead poisoning. Both of his fore arms and hands show muscular atrophy, especially the interossei. Depressions between carpal bones very marked; cannot

extend phalanges very well, and cannot approximate or touch the fingers to each other without the help of the other hand. The fingers, especially the little one, are very prone to numbness.

The atrophy is greater on the right side, *i.e.*, the muscle of the right fore-arm and hand. His father's left fore arm and hand only has undergone atrophy, but to a greater degree. The muscular atrophy, it is unnecessary to state, appeared soon after the fracture of the elbow.

ARMENAG ABADOORIAN,
House Surgeon, Charity Hospital, N. Y.

Remarks upon the Operation of Thyrotomy,

BY C. O. TERREY, M. D.

Since the introduction of the laryngoscope as a means of surgical diagnosis, foreign bodies and tumid growths in the larynx have become objects of direct and visible operation from above, the parts being seen in the mirror, the instrument applied by the chink of the glottis; or from below, by means of an incision below the vocal chords. The operation from above is feasible in the adult whose parts are large and whose self control is good, hardly in the child, except under anæsthesia, which adds its own dangers to the difficulties of the case. These remarks, however, apply to an operation by incision, feasible in all cases.

In December last my friend, Prof. Hamilton, communicated to me some details of the case of a child who had been always aphonic, and lately subject to alarming attacks of dyspnoea, from what the laryngoscope discovered to be a sessile tumor just under the vocal chord.

Laying before him the results of my dissections, to which his kindness had much assisted me, and having in mind Krishaber's case, (*Gaz. hebdomadaire*, 1869, p. 535), I recommended thyrotomy, not the usual subchordal incision, but one involving only the height of the thyroid cartilage, an interchordal incision.

The superior or false chords arise anteriorly at the root of the epiglottis, at a point corresponding to the upper extremity of the symphysis of the two thyroid wings. The true chords in the adult are about $\frac{1}{2}$ of an inch below the false chords. If the point of a curved bistoury be pushed directly backward, at the membranous angle formed at the junction of the incurving anterior superior corners of the thyroid wings, it will pass between the anterior extremities of the false chords; if the incision be carried directly downward, the whole length of the thyroid symphysis, a distance of about $\frac{1}{2}$ of an inch, it will reach a point $\frac{1}{2}$ to $\frac{3}{4}$ of an inch below the true chords. There is then above, the thyro-hyoid membrane, and below, the thyro-cricoid membrane, two dilatable membranes, which, when the cartilaginous margins are pulled asunder, give to the incision the form of a quadrangular opening, large enough to expose the ventricles, interchordal and subchordal regions to a moderate light.

I say curved bistoury, because the point of a straight bistoury, unless depressed below the horizontal plane, is liable to pass into the loose tissue under the epiglottis; the point of the curved bistoury will naturally decline a little.

The junction of the anterior margins of the thyroid wings is mediate, the medium being a long and narrow strip of cartilage, which, as it gives attachment to the anterior extremities of the vocal chords, may be called the *vocal cartilage* (Rambaud et Renault; *Origine et Développement des os*).

This cartilaginous lamina is thinner, less opaque, and more flexible than the thyroid wings for a number of years, till towards middle age it begins to ossify in common with or a little earlier than the other cartilaginous components of the larynx.

The presence of this ossifying or ossified cartilage explains the laterality of laryngeal fractures, (Cavasse; *Thèse sur les fractures traumatiques du larynx*, Paris, 1833).

At all times, and especially after ossification commences, the knife is inclined to run from the median line towards the sides of this middle piece of cartilage, whereby a vocal chord might be damaged.

The height of the thyroid symphysis varies with age and sex, being generally less in the female. In the child of half a year it is from $\frac{1}{4}$ to $\frac{1}{2}$ of an inch, and the borders of the incision are so yielding that the chords and ventricles are easily brought into view.

It seems better to stretch or dilate rather than to cut the membranous fibers above and below, when more room is needed, for across the thyro-hyoid membrane is an anastomosis of the *ramus thyroid art. lingualis* (Loder. *Tab. xci.*), and the *hyoid* branch of the superior thyroid which forms an anastomotic arch below the os hyoid (Gray), while on the thyro-cricoid membrane will be the *art. crico-thyroidea*, or possibly, as Chassaignac found, the trunk of the superior thyroid, instead of giving off the inferior laryngeal branch, passes itself transversely across the thyro-cricoid membrane. The superior laryngeal immerses at a respectful distance from the median incision.

Unless there be considerable fat in the meshes of the superficial fasciæ, the pomum Adami and whole line of the intended incision will be covered merely by the skin, superficial and cervical fasciæ, all thin here.

With the head tilted a little backwards the skin will be put upon the stretch; the larynx is fixed against the cervical vertebrae by the moderately tense soft parts; then the body of the hyoid bone is just a little above the upper end of the thyroid symphysis, and on a plane considerably anterior to it. In the child and female there is usually a layer of consistent whitish fat in the meshes of the superficial fascia; and there is frequently a vein running vertically down the median line, directly over the site of the intended incision. It passes to the suprasternal plexus, and, being embraced by the anterior aspect of the deep fascia, can be easily drawn aside. Although these remarks are almost entirely from an anatomical point of view, the success of Krishaber's case, above cited, and the ease with which Prof. Hamilton operated through the thyroid incision, encourage a trial.

On the True Principle of Treatment in Joint Diseases.

BY CHARLES F. TAYLOR, M. D.,
OF NEW YORK.

In the management of all diseases of the joints, it is only necessary to possess true views of their pathology in order to have the key to their treatment. The true articular disease is always inflammatory, and in most, if not in all cases has a traumatic origin. Out of 50 cases of disease of the spine 26 were traced directly to an injury. As in the majority of these cases the disease had existed for years, and as the disease must exist for a considerable time before a deformity appears, thus disconnecting the deformity by a long interval from its cause, it is only strange that so many were traceable to their traumatic origin.

It is the same with disease of the hip joint. Out of 26 cases 12 were traced directly to an injury. Another interesting fact tells strongly on the same side. In 27 out of 44 cases it was the right hip which was affected; and when it is not the right hip we generally have a special reason for it in an accidental injury to the left. Children as well as adults are in the habit of putting the right foot forward in any leap, slip or struggle, so that the heavy blow or concussion almost invariably falls on the right leg, and through that on the right hip.

These joint diseases being then mostly, or perhaps wholly, caused by injuries—though, of course, more easily produced in strumous constitutions—and, moreover, purely inflammatory in their first stages, there remains to

be applied the one all-important indication covering all inflammations everywhere, *viz.*—*rest*. Give any inflamed organ, wherever situated, absolute *rest*, and it will recover, unless the vice of constitution be too great. But it is astonishing what an amount of recuperative power there may be even in a depraved constitution, if we give the organ in a state of acute inflammation absolute *rest*.

I remember hearing an eminent surgeon at a medical convention—they were discussing cystitis—say, "If ever I am attacked with inflammation of the bladder I hope some one will have sense enough to puncture it, so that my poor bladder may have *rest*." Anything is safer than the constant effort of an inflamed organ. The modern, or what is called by a late writer in Paris the "American method" of securing *rest* to an injured and inflamed articulation by mechanical means, responds directly to the indications of those cases. Caries and suppuration are the effects of unarrested inflammations. These inflammations should not be allowed to proceed so far. Out of one hundred and eighty-three private cases only two passed into the suppurative stage. To allow a case of disease of the spine or hip joint to pass on beyond the period of simple inflammation when the disease can be arrested as easily as inflammation can be arrested in any other part, is a plain neglect of duty to the patient. To be sure, it is not always easy to contrive the mechanical means, nor to properly apply them, so as fully to realize the *rest* to the inflamed joint we seek; but so much at least should be attempted; and if possessed with earnestness, and with a full realization of the true pathology of such cases, and the benefit to be secured to the patient by it, no one ought to fail of making an effort in the right direction. And as to mechanical appliances, better trust to his own clear conception of the case, and the means to accomplish the result, than to depend on ignorant mechanics, who will be apt to confuse and thwart the first endeavors of the surgeon. An ingenious surgeon can whittle with his pocket knife from a fence rail, if he clearly comprehends what he wants, a better hip joint splint or spinal instrument than ninety-ninths of those for sale in the shops.

But, whatever the appliance employed, that is best which actually gives the completest *rest* to the inflamed organ, and keeps that *rest* steadily and undisturbed for the longest time. But as the best appliances are the results of the clearest conception of the true nature of the disease, these appliances become very important considerations.

Selected Articles.

Pulmonary Hemorrhage.—The following are Niemeyer's conclusions on this subject:—

1. Abundant bronchial hemorrhages occur more frequently than is supposed in people who neither then nor ever afterwards are consumptive.

2. In many cases the commencement of consumption is preceded by abundant hemorrhage, but there is no genetic connection between the two, which really arise both from a common source. The patient has, in fact, a predisposition to them both.

3. Hemorrhages from the bronchial mucous membrane proceeding from consumption are sometimes in true genetic connection with it, inasmuch as the hemorrhage may lead to inflammatory processes in the lungs, terminating finally in their breaking down.

4. Bronchial hemorrhages occur much more frequently in the course of a consumption than before the disease. They really refer to the time in which the lung disease was as yet latent.

5. Bronchial hemorrhages occurring in the course of consumption may make that disease fatal by means of their tendency to hasten the destructive inflammatory processes.—*Syd. Soc. Bienn. Retrospect.—Ecl. Med. Jour.*

Dysenteric Arthritis.

The *Archives Générales*, of August, contains an article with this title, by Dr. Huette. More than a century ago this form of disease was recognized by Zimmerman and others. Most of these observers, however, explained it as occurring from metastasis. Dr. Huette terminates his elaborate paper with the following conclusions:

"1. There is a variety of arthritis having its sole and necessary cause in an epidemic phlegmasia of the mucous membranes of the rectum and of the colon.

"2. This rheumatismal manifestation does not occur in every epidemic of dysentery; it is subordinate to the influences of a peculiar medical constitution: individual diathesis may favor its development.

"3. Dysenteric arthritis, essentially apyretic, differs in its causes, in its progress, its general aspects, and its consequences, from simple articular rheumatism. It presents a great analogy with blenorragic rheumatism.

"4. Dysenteric arthritis, almost always poly-articular has a duration of several weeks or several months. It generally terminates by resolution—rarely by suppuration and ankylosis.

"5. Metastasis does not explain the appearance of this arthritis, as was formerly thought. It is more rational to attribute it to a morbid affinity, which, the mucous membranes being diseased, determines reflex pathological effects upon other tissues of the economy."—*Western Jour. of Med.*

The Influence of Weather on Sickness (Medical Times and Gazette).—Dr. Ballard, in his report on the health of Islington for 1867, thus aphoristically states the influence of the weather on sickness:

1. That an increase of atmospheric temperature is normally associated with an increase of general sickness.
2. That a decrease of atmospheric temperature is normally associated with a diminution of general sickness.
3. That for the most part the increase or decrease of sickness is proportional in amount to the extent to which the atmospheric temperature rises or falls.
4. That it is an error to suppose (as is popularly held) that sudden changes in temperature are, as a rule, damaging to public health. A sudden change from cold to hot weather is indeed very damaging; but a sudden change from hot to cold is one of the most favorable circumstances that can occur when sickness is regarded broadly as respects a large population.
5. That, remarkably enough, these influences are most marked in the directions I have mentioned in the colder season of the year, and more certain in the winter than in the summer.
6. That rises and falls of temperature are more certain and effectual in their special operation upon public health, when at the same time the daily range of temperature is lessened, than they are when the daily range is at the same time increased—rises of temperature increasing sickness more certainly and markedly, and falls of temperature decreasing it more certainly and markedly.
7. That a fall of rain lessens sickness generally—sometimes immediately, sometimes after a short interval—and that, as a rule, the reduction of general sickness is greater when the fall of rain is heavy than when it is light.
8. That drought, on the other hand, tends to augment general sickness.
9. That wet weather in the summer season operates more certainly in improving public health than it does in the winter season.

Chlorocodide.—This is a base procurable from codeia, intermediate in composition between it and apomorphia. It is a most intense bitter, and may prove useful as a stomachic and tonic. A quarter of a grain taken by the mouth causes an uncommon sense of tonicity in the abdomen. Quina, which is so often given as a stomachic, is a much less intense bitter than chlorocodide, and tends to produce fullness and aching of the head, which chlorocodide does not.—*Dr. S. J. Gee.—Braithwaite.*

Chloral.—Chloral is not introduced to the profession as a rival of the anæsthetics used in operative surgery, but as a substitute for opium. When administered in an efficient dose (a drachm is not an immoderate dose for an adult) it produces on man and on the inferior animals a kind of stupor or sleep, which may be made to extend over five or even seven hours with comparative safety. It is attended with great muscular prostration, and with decrease of animal temperature. The hydrate of chloral is a white solid substance, having a pungent smell, with which is combined the odor of ripe melon. The hydrate dissolves readily in water, and thirty grains of it dissolved in forty of water make up one fluid drachm of a saturated solution.—*Editor of Lancet—Braithwaite.*

Chloral, so far as at present appears, possesses all the advantages of opium and none of its disadvantages. It rarely causes nausea, never vomiting, nor does it leave behind it headache or loss of appetite. The sleep produced by it is gentle, and unattended with any symptom of distress. Cats purr, as they pass into rest, in obvious comfort and repose. During a portion of the period of narcotism there may be complete anæsthesia, with absence of reflex actions, and a condition in which every kind of operation fails to call forth consciousness. In the transition from drowsiness to stupor there is no stage of muscular excitement. The action of the substance on the nervous system is primarily on the sympathetic ganglia, afterwards on the cerebrum, and finally on the heart.—*Dr. B. W. Richardson—Ibid.*

Chloral is a rather pungent liquid, produced by the action of chlorine upon alcohol, and it forms a crystalline hydrate with water. When this hydrate is administered medicinally it is decomposed in the blood, and chloroform is set free, producing its usual effects on the nervous system, but different in this respect, that the action is more prolonged in consequence of the slow evolution of chloroform, and the troublesome sickness of chloroform does not follow. In a case in which the hydrate of chloral was given in doses of forty-five grains, sound sleep was procured every night, and complete relief to distressing neuralgia. The patient complained of headache next morning. The German journals state that there is complete freedom from any distressing after effects.

Thirty grains of chloral give about as much relief to pain as one grain of opium, but its effects are more immediate. It is not so certainly followed by sleep, or by sleep of such long duration, but on the succeeding day no kind of ill effect is observed.—*Mr. T. S. Wells—Ibid.*

Hydrate of chloral varies considerably in its action with different constitutions. Whilst in one case forty grains will procure sleep, in another seventy may produce no effect. When sleep is produced it is always rapidly so, and it is generally calm and peaceful, but in most cases slight congestion of the head and face and slight perspiration are noticeable.—*Mr. J. H. Barnes—Ibid.*

Destruction of a Cancerous Tumor by Gastric Juice.—A very remarkable experiment has been made by Professor Lussana. A woman, aged 52, had an open ulcerating tumor, occupying the whole temporal region, adherent to the bones, and presenting all the appearances of cancer. Removal by the knife seemed too dangerous; whereupon Lussana suggested the application of gastric juices as a solvent, and himself provided the juice from the stomach of a dog in which he had established a fistula. After the first three applications of the dressing so much irritation was excited that a febrile erysipelas set in; a week later the tumor was found to be reduced in volume by one half; and of two hardened glands in the neighborhood one had disappeared and the other had suppurated. A new application of the juice was now made, and the irritant symptoms reappeared. The tumor continued steadily to diminish, and in about sixteen days from the first dressing there was nothing left but a flat, raw surface, covered with rather exuberant granulations, and no glandular enlargements any longer existed. Two or three weeks later the wound had entirely healed, and the patient was perfectly well.—*Gaz. Med. Lomb.—Eclectic Med. Jour.*

Pancreatic Juice in the Treatment of Cancer.—Professor Schiff (*Med. and Surg. Reporter*), during the recent International Medical Congress at Florence, Italy, read a paper on the use of pancreatic juice in the treatment of cancer, which will, probably, be considered as the most important contribution rendered to the International Medical Congress of 1868, and the science it was intended to promote. After a long and careful series of experiments, Professor Schiff has established that whilst great danger attends the attempted reduction of cancer by the application of the gastric juice, no such dangers are involved in the application for the same purpose of the pancreatic juice, which is found only to affect the unhealthy tissues. Professor Schiff illustrated this conclusion not only on a proportion of bodies to which the two juices had been applied, but by a living patient, in whom all the more alarming symptoms of cancer had, under the application of the pancreatic juice, disappeared. The loud cheers of the Congress testified to the unanimity of approbation with which the members greeted these researches.—*Med. Archives.*

Digitalis in Suppression of Urine.—Howard D. Reynolds, M. R. C. S., reports a case of suppression of urine treated successfully by the external application of fresh digitalis leaves made into a poultice. In six hours after the first poultice was applied a pint of clear, pale urine was voided. Previous to this she had not passed more than a wineglassful of urine in six days. She had the usual symptoms observed in such a condition, for the relief of which sweating, warm applications to the parts affected, and the internal use of digitalis, had been employed without success. The external use of digitalis was introduced by his preceptor, J. D. Brown, Esq.—*Baltimore Med. Bulletin.*

Copper as a Prophylactic in Cholera Epidemics.—The statistics of M. Burq, before the French Academy of Sciences, in reference to the prophylactic action of copper in this disease, confirm the observations of M. Clapton in reference to the immunity of men engaged in the various copper works in London. M. Burq states that only 1 out of every 1,270 workers in copper was attacked, the whole number of men engaged in this kind of work in France being 37,000. This was during the epidemic of 1865-6. An equal immunity was not enjoyed by workers in iron and steel.—*Ibid.*

The Therapeutic Employment of Compressed Air in Asthma and in Emphysema.—At a meeting of the Académie de Médecine, November 20, 1869, Dr. Gent read a paper on the therapeutic employment of compressed air in asthma and in emphysema. According to Dr. G., compressed air is at once a sedative to circulation and to respiration, and a tonic to the bronchial mucous membrane. It is suitable in all maladies of the respiratory passages, laryngeal and bronchial inflammations, chronic pneumonia, catarrh, asthma, emphysema and whooping-cough. As an excitant of digestion, and by the increased quantity of oxygen it conveys to the blood, it is indicated especially in chloroanæmia.—*Archives Générales.—Am. Practitioner.*

Hydrophobia.—Dr. Buisson recommends one of the most simple remedies, being at the same time preventive and curative. He says, when a person is bitten by a mad dog he should take seven steam baths, one each day; Russian, for instance, of fifty-seven to sixty-three degrees. When the disease makes its appearance only one steam bath is necessary, raising the temperature hastily to 50 degrees centigrade, and afterwards slowly to 63 degrees. The patient should be well confined to his room until completely cured. He says he cured himself by these means, and more than eighty persons besides.—*Jour. Mat. Med.*

Treatment of Epilepsy.—George Johnson, M. D., F. R. C., Physician to Kings College Hospital, advocates chloroform in connection with bromide of potassium in this affection. Chloroform wards off a threatened fit and cuts short a violent and prolonged paroxysm.

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Recitations are held daily by the Professors and Instructors in all the branches necessary to a medical education. Clinical instruction in Medicine and Surgery is also given daily at the Massachusetts General Hospital and the City Hospital. Other hospitals and the various dispensaries and infirmaries in the city are likewise open to students. Lectures on special branches will be given at the College by University Lecturers, and courses on the sciences connected with Medicine, Zoology, Botany, Chemistry and Physics, will be delivered in Cambridge by the Professors in these departments, which students may attend without extra charge.

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A detailed account of the Winter and Summer Sessions, as well as of the Harvard Dental School, will be forwarded (post-paid) by DAVID CLAPP & SON, 334 Washington Street, Boston. The Janitor of the College will advise students in the selection of boarding places, and will always have a list of such as are in the vicinity of the College Building, varying in their rate of charges. Students are invited, on coming to town, to call upon the Dean of the Faculty, 114 Boylston Street, to whom all letters must be addressed.

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We would especially request druggists to be kind enough to present it to the notice of physicians in their immediate vicinity.

As we shall also send the present number to the different medical colleges in our country, expecting to reach all the professors and students, we would ask for it a thorough examination before they throw it aside. Do not jump at the conclusion that it is worthless because cheap, for those most competent to judge have long since spoken of it differently. Our charges are low, in order to bring it within the reach of all. Let those who think the price of the subscription too insignificant send us a dollar or more, with the name and address of one or more of their friends, and we will gladly send them the journal. We doubt whether any medical journal gives more, if as much, medical intelligence for the price. We take this opportunity to thank those professors who have volunteered their services to bring the journal to the notice of, and see it circulated among the students at their respective colleges.

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We would once more urge all those who are yet in arrears to send in their fifty cents without any further delay, as we need all to carry out our plans.

We refer our readers to the original sheet. The names of the contributors are so well known

to the profession at large that we need scarcely refer to them.

We would again urge it upon our fellow practitioners to write more than they do, and not to hide their knowledge and experience under a bushel. If they have anything interesting to the profession let them write it out as briefly as possible, and send it to some medical journal. Should they wish to have their articles read by many, let them be sent to the "PHYSICIAN AND PHARMACEUTIST." Please do not forget that the journal is to appear on the First of February, May, August and November. Have your articles always ready at least a month earlier, else we are either unable to have it appear in that number or else have our issue retarded.

Among the many topics that present themselves we can, perhaps, at this time, speak a word to no better purpose than refer all our medical schools to the notice of the *Medical College Convention* to be held in the city of Washington, on the *Friday* preceding the *first Tuesday* in May, 1870. We trust every regular medical college in the country will be ably represented, that we may hear something having been done at length toward raising the standard of our medical education. Let every medical college determine to graduate *not the greatest number* but the *best men*—men of good preliminary education and of high medical attainments. Let the coming convention become noted, not for its *much talk*, but for its *decisive action*. This is the only efficient way we can see of ridding the country of quacks and quackery and vaunting ignorance. Raise the standard of medical education, by a better and more uniform method of instruction and a longer course of study, and the medical profession will no longer need to blush and hang its head at the ignorance of its members.

If we are fairly startled at the advancements made in the medical science and art during the last ten years, what may not be expected in the next quarter of a century with these desirable changes made?

In this connection we would recommend and urge the necessity of organizing an alumni association at every medical college, and the raising of a prize fund, the interest of which should be awarded as a prize or prizes of different degrees, as often as deemed advisable, for the best essay or essays, open for competition to the alumni of each college, separately, competitors selecting their subjects. This plan, with a fund amounting last spring to \$3,150, has been instituted by the College of Physicians and Surgeons of this city, the prize committee having \$200 at their disposal for a prize, to be awarded at the commencement next in March.

A course like this, pursued in every medical college, would encourage, among the alumni a spirit of emulation and devotion to scientific research that would eventually redound to the honor of every medical college and the progress of the medical science.

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THE CINCINNATI LANCET AND OBSERVER has entered upon a New Year in a new costume. This journal has commenced its thirty-first volume, and claims to be the *oldest medical monthly* in America. We like its present appearance, and if the January number is a fair index of the volume for 1870, it promises to be one of our very best exchanges. We hope Bro. STEVENS' subscription list will receive a large increase, which his journal truly merits.

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"DEAR DOCTOR—I have received the August and November numbers of the PHYSICIAN AND PHARMACEUTIST, and find their contents remarkably instructive and interesting. I regret not being aware of the existence of the journal before the November issue. I wish you would put my name on your list of subscribers. Please also insert, in your 'days of meeting of Medical Societies,' that of the Medical Journal Society of the Long Island College Hospital, the second Monday evening of each month.

"Very respectfully yours,

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"MY KIND FRIEND—The PHYSICIAN AND PHARMACEUTIST has reached me, and you can imagine my surprise on seeing your name as editor. However, a paper, and especially a medical one, needs one at its head like yourself—one full of energy, perseverance and knowledge. I do not wish to be without it. In these days of science, which is hourly increasing, one needs to have a compendium, for it is impossible to read so much; even if one had time, we could not remember it.

"M. E. B., M. D."

"SAN FRANCISCO, Dec. 5th, 1869.

"DEAR DR. S.—Yours, mailed the 25th ult., reached me yesterday, and also the PHYSICIAN AND PHARMACEUTIST. The price of the journal is too small for the amount of matter contained, and I anticipate you will find it necessary to increase the price by another year."

Bibliography.

The Physiology of Man; designed to represent the existing State of Physiological Science, as applied to the functions of the Human Body. By AUSTIN FLINT, JR., M. D., Prof. of Physiology and Microscopy in the Bellevue Hospital Medical College, N. Y.; Fellow of the New York Academy of Medicine, etc., etc. One vol., 8vo. pp. 526; \$4.50. D. APPLETON & Co., New York. 1870.

The third volume of Dr. Flint's treatise on human physiology, secretion, excretion, ductless glands, nutrition, animal heat, movements, voice and speech, compares favorably with the two that have preceded. One more volume will perfect the series, without which no library should be considered complete. It will be, when complete, a work of reference, at once comprehensive and systematic. It is compiled and written with the greatest care and accuracy, seeking its superior in any language. It is one of those works that will place its author among those well known, read and admired on both hemispheres. The volume is gotten up in Appleton's best style, printed in large, clear type, on beautiful tinted paper. The work is of transatlantic reputation, and cannot fail to be appreciated, not only by American physiologists, but also by the active practitioner who is at all desirous to adorn his profession, and keep pace with the rapid progress the noble science of medicine is making.

A Practical Treatise on the Diseases of Children. By ALFRED VOGEL, M. D., Professor of Clinical Medicine in the University of Dorpat, Russia. Translated and Edited by H. RAPHAEL, M. D., late House Surgeon to Bellevue Hospital, attending Physician to the Eastern Dispensary for the Diseases of Children, &c., &c. From the Fourth German Edition. Illustrated by six colored plates. 8vo.; pp. xiv. 603. \$4.50. New York: D. APPLETON & Co. 1870.

The work before us is divided into eleven chapters. The first three are introductory, treating of the "anatomic-pathology of the Infantile Organism, general rules for the examination of children, and the nursing and care of children." Then follow special subjects: "Diseases originating directly as a result of the delivery; diseases of digestion, embracing the mouth, pharynx and oesophagus, stomach and intestines, liver, spleen and peritoneum; diseases of the organs of circulation and respiration; of the nervous system, bladder and genital organs; of the skin and of general diseases of the secretions, as rachitis, tuberculous and scrofulous cachexia, and hereditary syphilis."

Dr. Vogel is regarded as having written the best treatise on children in the German language.

The full and comprehensive character of this work can readily be imagined from the brief sketch given above.

Without now going into any lengthy review, we will say this, that the work is worth being read and studied by all interested in the subject. We are especially well pleased with the first part of the book, and also with his pathology, etiology, and symptomatology, less so with his therapeutics. The latter is too expectant and vague, being either too inefficient or too active.

While the author has many advocates in the strong use (we would say abuse) of opiates, we cannot refrain here, as on former occasions, from advising our readers against the use of them on infants.

The translation, which is from the 4th German Edition,

is commendable, the mechanical part good, and beautifully illustrated by six lithographic plates.

We hope the book will receive the sale it so eminently merits.

A Treatise on Intraocular Tumors, from Original Clinical Observations and Anatomical Investigations. By H. KNAPP, M. D., late Professor of Ophthalmology, and Surgeon to the Ophthalmic Hospital in Heidelberg. Translated by S. COLE, M. D., of Chicago. New York: Wm. Wood & Co. 8vo. pp. 323. 1869.

To announce the name of the author of the work under consideration is alone sufficient guaranty of its intrinsic value. Dr. Knapp has been engaged for many years in observing and collecting the appropriate cases here presented. He says: "Were I to rely only upon the results which I have obtained from my own observation, ocular tumors would hardly admit of more than two varieties, viz.: *glioma (encephaloid)* originating in the retina; and *sarcoma*, proceeding from the choroid, and being in part unpigmented and in part melanotic."

That other varieties of tumors (especially carcinoma) may arise in the eye the author does not deny, yet adds, "that in the more detailed descriptions contained in medical literature, he did not find any convincing instance." "Only a few brief remarks of Virchow," says he, "confirm the existence of true carcinoma in the eyeball." "Science, as it progresses, will, at some future day go beyond the discoveries of Virchow, but will not overthrow his positive results; on the contrary, will employ them as foundations for future developments." The writer adopted the nomenclature of Virchow, because he considers it more precise and explicit than any before it. He further tells us, that he has "purposely abstained from indulging in theoretical speculations."

In an appendix he gives notes on other forms of tumors occurring in the eyeballs, taken from the very latest literature on the subject. Dr. S. Cole, translator of the book, has been a most industrious student of the author, and a personal attendant on his clinical and didactic lectures at the Ophthalmic Hospital in Heidelberg.

He having seen not only most of the Doctor's anatomical preparations, but also observed some of the cases described, makes him thoroughly conversant with the subject, which the author considers "no less indispensable for a good translator than a perfect knowledge of both languages."

The volume is beautifully illustrated with one chromolithographic and fifteen lithographic plates, containing very many figures. The paper, typography and binding are good and substantial.

This work should find a large sale, not only among ophthalmologists, but also among general practitioners, for the same reasons that have actuated the author to study the subject and write the book. Says he: "I have been induced by two reasons to study more minutely the subject of the present treatise: (1) Because the diseases here spoken of are perfectly harmless and masked in their earliest stages, but on further growth become so horrible and destructive to the patient and those about him, that they awaken, of themselves, the highest sympathy of the physician; and (2) because I am convinced that intraocular tumors especially are destined to throw light upon many general questions of fundamental significance for the theories and therapeutics of tumors in general."

Transactions of the American Medical Association. Vol. XX. 8vo.; pp. 853. 1869.

The present volume is fully equal, if not the superior of any of its predecessors. Coming from a body which is supposed to represent the highest character and most scientific authority of the medical profession, this publication should be, as it is, above ordinary criticism.

A vast amount of labor was performed during the session by the various committees, and generally in a com-

plete and satisfactory manner. The able address of the president, William O. Baldwin, M. D., would bear constant repetition until the reforms it advocates were thoroughly inaugurated. The report of the committee on the relation of alcohol to medicine is so valuable that it should be brought to the notice of every member of the profession. The same might be said of other papers equally valuable, and we earnestly advise all medical men to procure a copy of these transactions.

Diseases and Injuries of the Eye; their Medical and Surgical Treatment. By GEORGE LAWSON, F. R. C. S., Surgeon to the Royal London Ophthalmic Hospital, &c. Philadelphia: LINDSAY & BLAKISTON. 8vo.; pp. 436. \$2.50. 1869.

Within the last year or two quite a number of new works on the eye have appeared, some quite large and exhaustive, others in more of a hand-book form. The one under our consideration is of medium size, discussing briefly all that is necessary for a general practitioner to know about the diseases and injuries of the eye, giving both the medical and surgical treatment for all the varieties of diseases of the *Conjunctiva; Cornea and Sclerotic; Iris and Vitreous Humor; Crystalline Lens; Retina; Choroid and Optic Nerve; Anomalies of Refraction and Accommodation, as Myopia, Hypermetropia, Presbyopia, Astigmatism and Asthenopia; Strabismus; Special Injuries of the Eye; Diseases of Lachrymal Apparatus of the Eyelids and of the Orbit*; adding a *Formulary of Prescriptions* and a page of *Test Types*, reduced from those designed by Dr. Orestes M. Pray, of New York, to aid in the diagnosis of astigmatism. When fuller information is required on any subject than here given, the author refers the reader to the "Treatise on the Eye," by Mr. Soelberg Wells, or to the "Natural and Morbid Changes of the Human Eye," by Mr. Bader. For the busy practitioner it forms a *reliable friend and companion*, and for the student a *text-book* which seeks its superior. The book is gotten up in a good and handsome style, well illustrated with cuts of the best instruments to be employed in the various operations.

Vital Resources; or, How to Become Physiologically Younger and Stronger. By JEROME KIDDER, M. D. 12mo., pp. 167. \$1.50. Published by the Author, 544 Broadway, N. Y.

The title-page of the little volume before us claims to be "a scrutiny into the domain of the laws to which nature sometimes marvelously resorts for aid in its restorative powers;" in other words, it opens for the reader an insight into the plurality of individual personality, and of that latent inheritance which may be aroused to action.

The author claims it as being the only work showing these facts, and their bearings in determining longevity. In support of the conclusions presented he briefly refers to known physical laws, and then more fully to those not so well known to general observation.

Under the plural personality of individuals he discusses mental and anatomical phenomena. He speaks of hereditary influences and latent peculiarities. He refers to marriages of consanguinity and the effects of maternal impressions, the reciprocity of body and mind, and latent qualities that may be aroused to action. Under the subject of plural personalities the author gives three illustrations, with portraits. One is that of the late John A. Roebling, one of the most skilful engineers of the age; another of M. Eugene Rouher, a great French orator. These he considers striking examples of plural personality, which show their power and great capacity for intellectual work strikingly in their features. Whilst most of the interesting examples alluded to in the volume may be familiar to the reader, the conclusions which they are made to reveal, favoring the probabilities of health and long life, if true, are so novel that they are worthy of your consideration.

Medical Common Sense, applied to the causes, prevention and cure of Chronic Diseases; and *Plain Home Talk*. By EDWARD B. FOOTE, M. D. Third revised and enlarged edition, pp. 909. New York. Published by the author. 1870.

The author informs us, in his preface to the third edition, that in twelve years this volume has grown from a book of three hundred pages to its present magnitude. Were the present volume to be judged only by its growth and size, it would certainly speak for itself, without any comment. However, on examination, we find good sense, "common sense," and nonsense so blended, that we would consider it of much more value were the present volume reduced to the original three hundred pages. In the present age one cannot afford the time to read what is not first class. If what is of some value were alone presented, in the shortest possible space, it would make a readable little book. There is much contained in it of no earthly value, and considerable of a very objectionable character. But few will agree with the Doctor on the subject of Free Love and Free Lovers.

As the book is intended for popular reading, and chiefly employed as an advertisement for its author, the objections to it are so much the greater.

Choice Specimens of English Literature; selected from the chief English writers and arranged chronologically. By THOMAS B. SHAW, A. M., and WILLIAM SMITH, LL. D. Adapted to the use of American students by BENJAMIN N. MARTIN, D. D., L. H. D., Professor of Philosophy and Logic in the University of the City of New York. Pp. 477. SHELDON & Co., New York. 1870.

The editor, in presenting the present edition of Dr. Shaw's "Specimen of English Literature," adapting it to the wants and uses of American students, deserves great credit for the manner in which he has performed his task.

He has not only occasionally stricken out an extract on the score of coarseness, bad taste, of questionable truth or of doubtful morality, but has likewise materially extended the scope of the work, by presenting to the reader specimens of a number of English authors not included in the English edition, so that this American edition embraces one hundred and seventy-nine different authors.

The Wise Men: Who they were, and how they came to Jerusalem. By FRANCIS W. UPHAM, LL. D., Professor of Mental Philosophy in Rutgers Female College, City of New York. Pp. 245. SHELDON & Co., New York. 1869.

The little volume before us will be found interesting to the theologian and bible student. The book is divided into eleven chapters and an appendix, discussing the following subjects: 1. Who were the Wise Men? 2. Meaning of "The East;" 3. Character and Religion of the Persians; 4. The Magi; 5. Persians, Chaldeans and Hebrews; 6. Daniel and the Magi; 7. Hope of the Messiah in Syria and the East; 8. Kepler's Discovery; 9. Astrological Element in the Narrative; 10. Inspiration of St. Matthew; 11. Summary. Appendix: 1. The East and the Far East; 2. Relation of the Persian and the Hebrew Religions.

The Galaxy; Jan., 1870. \$1.00 a year. *Put Yourself in His Place.* Part First. By CHARLES READE. Pp. 208. \$1.00. SHELDON & Co., N. Y.

The *Galaxy* meets with unparalleled success. During the month of December, 1868, the entire subscription list doubled. During the first ten days of December the cash receipts of the *Galaxy*, from subscribers alone, have more than doubled, nearly trebled, what they were for the same time in December, 1868. This is surely the best indication of success. The *Galaxy* is at once in-

structive, brilliant and entertaining, containing articles by the leading writers of this country and Europe. Some of these cost the publishers a large sum of money. Among these comes Charles Reade's serial story, "*Put Yourself in His Place*," which will extend several months into the present year. The first part of this well written and amusing story can be obtained separate for one dollar, or gratuitously by subscribing for the *Galaxy*. We are pleased to publish Charles Reade's letter in this connection. He says:

"The publishers of the *Galaxy* pay me a liberal price for '*Put Yourself in His Place*.'"

"If I were a mechanical inventor, instead of a literary inventor, this payment would secure them the sole legal right.

"In the present iniquitous, partial, barbarous and brainless state of laws, it only secures them a clear moral right.

"But I hope all respectable publishers will respect that moral right, and will put themselves in *their* place, and will forbear to reap where they have not sown.

"CHARLES READE."

History of Civilization.

BY AMOS DEAN, LL. D.

In seven volumes. Vol. VII; pp. 631; 8vo, cloth. \$4 a vol. Albany, N. Y.: JOEL MUNSELL. 1869.

The seventh and last volume of Dr. Dean's great and interesting work treats of European art. The author speaks under Objective Arts of Architecture, Sculpture and Painting; under Subjective Arts of Music, Poetry and Eloquence; and under mixed Arts of The Drama, namely—the Italian, Spanish, French, German and English; and finally, of the Military Art.

The volume, besides, contains an index and a list of the subscribers to the work. We have but room to say, in noticing the last volume, that we consider no library complete without some work on the subject of civilization, and we know of no one work that would satisfy the reader better than this. Should any one say it is too extensive, then let him remember the comprehensiveness of the subject. Or, on the contrary, should it be alleged that it is not comprehensive enough for the subject, we would reply that it is as full and faithful a *résumé* of all history, presenting the main facts on the subject, as could be expected from any one man, though possessed with genius, and laboring carefully, faithfully and conscientiously for over thirty years, as the author of this work has done.

We clip the following from the *National Quarterly Review*, December, 1868:

"Proceeding to the subject of ethnography, Professor Dean develops his ideas and displays his erudition in a satisfactory manner. He has no pet theories, like the brilliant Buckle. We feel that he is desirous not to excite admiration for his own originality, but to arrive at reliable truth. We are especially impressed with the common sense character of his views, and of his handling of the subject.

"Tracing the development of languages, we cannot but admire his lucidity of method and accuracy of statement."

[From the *Evening Post*, December 29, 1868.]

"The new History of Civilization, by the late Professor Dean, takes a new path, almost wholly divergent from that of Buckle, Guizot and Hegel. The author has speculated less upon the synthetic view, choosing rather the opposite extreme of giving to every style of growth and development a thorough analysis. He has prepared an introduction to the study of history, making us acquainted with the people, their peculiar genius, their thoughts and customs, and, as far as practicable, the mainsprings of the action which made them conspicuous. The information embraced in many volumes is compressed into a brief space."

The Registrar-General says that every 100,000 tons of Thames water supplied to London contain from 27 to 41 tons of foreign matters in solution.

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Obstetrics, &c.

The Early Use of Forceps.—William M. Wallace, Chairman of the Erie County Medical Society, Penn., says that in his county the early use of forceps in severe labor is much more common than heretofore; in his hands it lessens the number of still-births, saves pain, avoids the bruising of soft parts from force that presses without relieving, and, by inclining the head forward, lessens the danger to the perineum. He inquires whether ergot does not endanger the uterus more than skillfully used blades.—*Med. Record.*

Dr. Wharton P. Hood reports (*Lancet*) a case of vaginismus cured by forcible dilatation of the vagina with Weiss's dilating bivalve speculum, at a single sitting. While it is evident that this procedure, where applicable, possesses advantages over the very severe surgical measures sometimes adopted, we should hardly call it, as does the author, a successful treatment "without operation."—*Med. Gazette.*

Ovariectomy.—Drs. Benson and Yandell, of Louisville, Kentucky, and Dr. Tom O. Edwards, of Lancaster, Ohio, have each recently successfully performed ovariectomy.—*Chic. Med. Jour.*

Chlorosis.—Dr. Ch. H. Bauer recommends, in the treatment of chlorosis, above all other remedies, the saccharate of iron, prepared after the formula of Karl. He says it is more easily assimilated, does not derange digestion as most chalybeates do. It is a rapid producer of animal heat; the previously cold hands and feet soon become warm, and the lips and gums red under its use.—*Med. and Surg. Reporter.*

In the Vienna Lying-in Hospital, for the year 1867, there were 8,163 confinements in the different departments. The total mortality among the women was 94, or 1.1 per cent.—*Medical Record; Bos. Med. and Surg. Jour.*

Sleeplessness in Infants.

Dr. Eustace Smith gives the following very useful hints in the *British Medical Journal*:

Hunger, to which the infant's restlessness is commonly attributed by the mother, may occasionally be the cause; but *injudicious feeding* is by far the most common cause.

Cold feet are a not unfrequent cause of wakefulness in infants.

In hereditary syphilis exceeding fretfulness at night is usually the first sign of the disease, preceding the snuffling and the other characteristic symptoms of the outbreak of the inherited taint.

Worms.—A well known common cause of night terrors and restlessness in older children are sometimes found to cause crying at night, even in infants. Besides these there are two other causes, of not uncommon occurrence, yet are frequently overlooked; one of these is the influence of *habit* upon the infant. Children are frequently too much petted and indulged.

Exhaustion of nerve-force.—The reaction following over-excitement of the nervous system is another not uncommon cause of wakefulness at night in children. Sleeplessness in infants is thus produced by many different causes, each of which will require a different method of treatment for its removal.

Chloroform in Infantile Convulsions.—George W. Akers, M. D., in the June number of the Cincinnati *Lancet and Observer*, reports a case of infantile convulsions, occurring from constipation and irritability of the alimentary canal, promptly relieved by chloroform administered internally.

Bromide of Potassium in Eclampsia.—In the recent and valuable work of Professor J. Lewis Smith, M. D., on diseases of children, he says that children who are subject to eclampsia, from trifling causes, are more benefited by bromide of potassium than by any other remedy.

Constipation in Infants.—Prof. A. Jacobi has an article in the *American Journal of Obstetrics*, Vol. II, No. 1, on some important causes of constipation in infants.

After treating of some of the common causes of constipation from improper food and abnormal gastric secretion, he calls attention to a frequent and important cause of constipation in infants from an insufficient degree of muscular power and action, depending on general rachitis.

This condition of malnutrition often occurs when the child is from two to three months old, apparently healthy, fat but pale, thorax short, respiration abdominal, scalp covered with scanty hair, peculiar softening of the bones from a lack of phosphates, with muscular debility in general, and muscular incompetency of the intestinal tract in particular.

The indications of treatment are not to give laxatives, for they would leave the muscles more powerless than before; but to give the syr. of phosphates co. 10 to 15 gts., or syr. iod. ferri. 4 to 10 gts. three times per day. Cod-liver oil will have a good local effect on the mucous membrane of the intestine, and at the same time improve the general condition.

If the cause can be traced to the mother, the child to be supplied with a wet nurse, or fed on beef tea, boiled barley or oatmeal, mixed with milk.—*Cin. Med. Repertory.*

Infant Mortality.—The last number of the *Journal de la Société Statistique* contains the following ratios of deaths of children under one year of age to every 100 live births in European States: Denmark, 9.32; Norway, 10.33; Holland, 11.37; Scotland, 11.91; Hanover 13.99; Sweden, 14.35; England, 15.39; Belgium, 15.53; Austria, 17.03; Spain, 17.07; France, 17.25; Prussia, 20.07; Saxony, 22.55; Italy, 22.85; Russia, 26.81; Bavaria, 31.03.

Surgery.

Single Flap Operation in Amputation of the Leg and Thigh.—Dr. Carpenter, in the Transactions Pennsylvania Medical Society (*Medical and Surgical Reporter*), claims the following advantages for the single flap (anterior) operation in amputations of the leg and thigh: The vessels being divided transversely, as in the circular method, are more readily secured.

Drainage is more perfect, and there is, therefore, less liability to bagging of pus—and that under these circumstances union by "first intention" is more likely to occur.

With regard to the stump, no tenderness can be caused by pressure upon the nerve in the face of the stump, inasmuch as it has been cut off with the main vessels in the rear; the unbroken surface of normal tissues extending across the end of the bone is not liable to bruising, or to ulceration, or tearing open, and an artificial limb can be adjusted much more satisfactorily, its pressure being exerted mainly against the anterior portion and face of the stump.

In performing the operation it is important that the flap be made of sufficient length to reach the rear of the stump without stretching, and that the soft part, posteriorly, be divided by a perpendicular sweep to the bone. The results of this operation were exceedingly satisfactory where used during the late war.—*Medical Archives.*

Acute Orchitis cured in Twenty-four hours.—The following case is related by Mr. Jordan: A man, aged thirty, had intense pain, intolerable tenderness, and great swelling and induration in both testicles, and could not stand upright. The scrotum was covered with a solution of nitrate of silver (two drachms to an ounce); a stripe of vesication was established over the upper halves of both femoral arteries by means of linimentum iodi, and the testicles supported with cotton wool. He was well in twenty-four hours.—*Abstract Med. Sciences.*

Contusions and Wounds of the Abdomen.—Mr. Le Gros Clark, in his lectures on the Principles of Surgical Diagnosis, now being published in the *British Medical Journal*, says:

In reviewing the observations which I have made on abdominal contusions and parietal wounds, they appear to me to justify the following conclusions:

1. Shock of the most profound character is often the consequence of simple contusion of the abdomen; and the intensity of the symptoms of collapse is no standard by which the nature of the injury can be determined.

2. The continuance of this state of collapse for two or three days is not necessarily conclusive as to the existence or otherwise of organic lesion.

3. Severe localized pain, and even general and continued abdominal tenderness, are not to be accepted as proof of organic injury, and are quite consistent with ultimate and even with early recovery.

4. Tympanitis and constipation, from temporary paralysis of the muscular coat of the bowels, are the consequence of shock or concussion of the cyclo-ganglionic nerve-centres.

5. Vomiting generally follows the severer forms of contusion of the abdomen, without reference to the part struck; it is sometimes persistent, but it is not a constant symptom.

6. Retention of urine is a common accompaniment of these injuries, and is usually attended by more or less insensibility to the presence of urine in the bladder.

7. Internal hæmorrhage, as a complicating circumstance, may occur in these injuries, without its presence being ascertained from the early symptoms; but a state of syncope, as distinguished from shock, especially if accompanied with local pain and swelling, and dulness on percussion, may be regarded as highly probable evidence that internal hæmorrhage has occurred.

8. Penetrating wounds, especially with blunt instruments or missiles, do not necessarily involve textural lesion of any viscus, but they are often fatal, nevertheless; primarily from shock or hæmorrhage, or the two combined, or secondarily from peritonitis.—*N. Y. Med. Jour.*

Cure for Corns.—Soak the feet well in warm water, then with a sharp instrument pare off as much of the corn as can be done without pain, and bind up the part affected with a piece of linen or muslin thoroughly saturated with sperm oil, or what is better, the oil which floats upon the surface of the pickle of herring or mackerel. After three or four days the dressing may be removed, and the remaining dead cuticle removed by scraping, when the new skin will be found of a soft and healthy texture, and less liable to the formation of a new corn than before. We have this recipe from a source which we cannot well doubt, and publish it for the benefit of many suffering readers.—*Journal of Applied Chemistry.* [Any emollient, like fresh lard, will answer about the same purpose—namely, render the cuticle soft.—Ed. of P. & P.]

A Mode of Treating Tetanus.—Quite recently a patient who had become attacked by tetanus after compound comminuted fracture of the little, ring, and middle fingers, was treated by section of the chief nerves of the arm. Mr. Maunder cut across the median, radial, and ulnar nerves in the lower fourth of the upper arm, instead of amputating.—*Medical Times and Gazette.*

Extraordinary Operation.—Dr. Boehm, a celebrated German surgeon, has just performed the operation of separating two female children, five years of age, who were joined together in the same manner as the Siamese twins. The German papers state that the operation was attended with perfect success; but one of the patients seems to have died the same day. The survivor is in good health.

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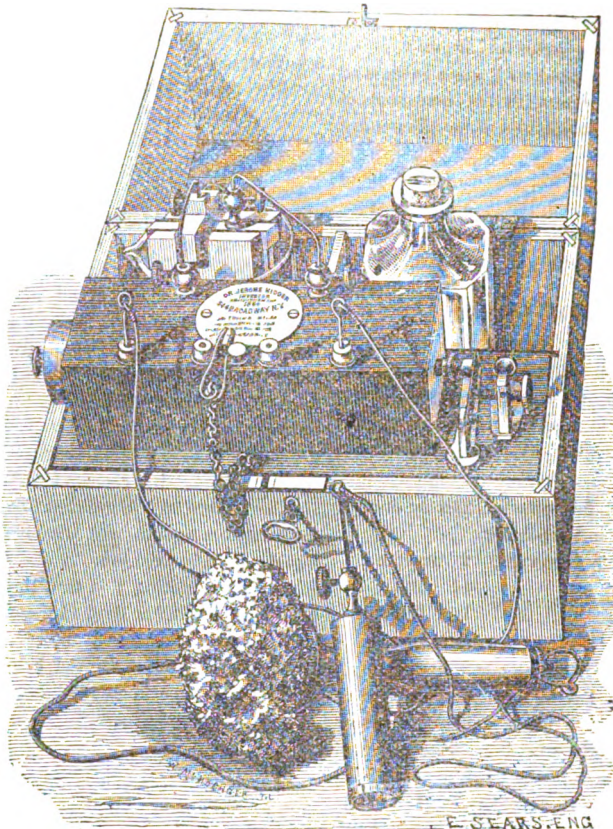
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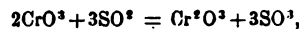
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A NEW VOLUME BEGINS JANUARY, 1870.

Address, Dr. E. B. STEVENS,
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Pharmaceutical Cleanings.

On the Preparation and Medicinal Use of Hydrated Sesquioxide of Chromium, by C. J. RADEMAKER, M. D.—“Having had frequent occasion to prepare this oxide of chromium the following process was resorted to: Bichromate of potash was decomposed in the usual way by SO^2HO , the CrO^3 separated, and reduced by means of SO^2 . The reduction may be explained by the following equation:



the sulphuric acid formed combining with the oxide of chromium to one equivalent of sulphate chrome. The sulphate of chrome was decomposed by ammonia; the chromic oxide was washed with boiling water and dried.

“This preparation has been used with great success in this city, by Dr. Wilson and others, in the treatment of cholera infantum and other complaints of the alimentary canal.

“Dr. F. C. Wilson, of New York, first informed me of its beneficial effects in these complaints, and at his suggestion the preparation was made. Its mode of action I am not able to give, but it is probably that of an astringent and tonic.

“Louisville, Ky., Jan. 9, 1870.”—*American Journal of Pharmacy*, March, 1870.

Aromatic Glycerate of Rhubarb.—II. Treverton Bond, of Wheeling, West Virginia, in the March number of the *American Journal of Pharmacy*, gives the following formula of what he calls the glyceratus rhei aromaticus: “Take of

Rhubarb, in moderately fine powder, $2\frac{1}{2}$ troy ounces.
Cloves, Cinnamon, each in fine powder, $\frac{1}{2}$ “
Nutmeg, in moderately fine powder, 2 drachms.
Glycerin, $1\frac{1}{2}$ pints.
Diluted alcohol, 1 “
Water, q. s.

Mix eight ounces of the glycerin with the diluted alcohol, then mix the powders, and having moistened them with $\frac{1}{2}$ iij of the mixture, introduce into a conical percolator and gradually pour on the glycerin and diluted alcohol mixture until a pint and a half of the tincture is obtained (displacing the last portions, if necessary, with water); add the rest of the glycerin to the tincture, then add sufficient water to measure seven pints, and mix thoroughly together and filter.

“The result is a handsome preparation, identical in strength with the syr. rhei. aro. of the U. S. P., and possesses none of its objections, while it has many advantages; it can be administered in much larger doses, and thus reach cases where a syrup would be inadmissible on account of the sickening properties of the sugar, or where a tincture would be interdicted by reason of the stimulating qualities of alcohol.”

Chlorodyne.—In answer to Dr. J. T. Seearce, Danville, Ind., who asks concerning the composition of chlorodyne, we append the original formula for this agent, as given by Collis Brown, of London: B.—Chloroform, $\frac{1}{2}$ iij; Tinct. Capsicum, $\frac{1}{2}$ jss; Oil Peppermint, gtt. xvj; Muriate of Morphia, gr. xl; Prussic Acid (eight per cent.), $\frac{1}{2}$ iij; Ether (fortior), $\frac{1}{2}$ ss; Molasses (New Orleans, dark), $\frac{1}{2}$ jss; Muc. Acacia, $\frac{1}{2}$ ij.

A modification of this, as suggested by Dr. J. Lawrence Smith, and prepared at the Louisville Chemical Works, and extensively used by the physicians of Louisville, rejects the molasses and muc. acacia, which are immediately precipitated from the compound, and only increase the bulk of the material without adding to its efficiency. Prof. S. also rejects the ether, increases the proportions of morphia and chloroform, and adds cannabis indicus. The following is his formula: B.—Chloroform, $\frac{1}{2}$ vj; Tinct. Capsicum, $\frac{1}{2}$ vj; Tinct. Cannabis Indicæ, $\frac{1}{2}$ jss; Oil Peppermint, gtt. xxxvj; Muriate of Morphia, gr. lx; Prussic Acid (Scheel's), $\frac{1}{2}$ j. M.—*Am. Pract.*, April, 1870.

On the Preparation of Liquid Pepsin.—In the *American Journal of Pharmacy*, March, 1870, Emil Scheffer, of Louisville, Ky., published results obtained from a variety of experiments, upon which experiments he has based the following formula for Liquid Pepsin:

“6 pounds mucous membrane of hogs' stomach are macerated in a mixture of
4 pounds glycerin,
4 pints water and
6 ounces of pure hydrochloric acid,

for thirty-six hours, after which the mass is put on a strainer, and when the liquid has drained the membrane is macerated again with three pints of water for two or three hours, then strained, and this proceeding repeated with smaller quantities of water until ten pints of liquid are obtained.

“The resulting liquid will be found mucilaginous, very turbid, of a strong disagreeable odor. After standing a few days, however, the liquid becomes limpid, a precipitate of mucus forms and, by filtration, a clear light straw-colored liquid is obtained, possessing a faint and disagreeable odor. Liquid pepsin, properly prepared according to the above formula, is of such strength that one fl. oz. is capable of dissolving one and a half drachms of coagulated albumen, which, of all albuminous and fibrinous substances, I considered the best adapted for ascertaining the strength of an artificial gastric juice. This test was made by adding coagulated albumen, cut into small cubes, to one fluid ounce of liquid pepsin, keeping the fluid at a temperature of one hundred to one hundred and five degrees, and shaking it from time to time until the albumen was dissolved. By repeated experiments with at first smaller quantities I found that one and a half drachms of coagulated albumen will dissolve in one fluid ounce of liquid pepsin in from four to six hours. Care must be taken, in conducting this test, that the temperature does not rise much higher than 105° , which, in all probability, would injure the solvent power of pepsin; and when heated to the temperature of boiling water I have found it, by actual experiment, to lose all action on albumen.”

Test for Arsenic.—A new and very delicate test for arsenic has been discovered by Bettendorf. Its sensibility is so great that it is said to be capable of detecting one part of arsenic in a million parts of solution—and the presence of antimony does not affect it. In order to apply this test the arsenious or arsenic liquid is mixed with aqueous hydric-chloride (hydrochloric acid) until fumes are apparent; thereupon stannous chloride is added, which produces a basic precipitate, containing the greater part of the arsenic as metal mixed with stannic oxide.—*Med. and Surg. Reporter*, April 16, 1870.

Glycerin Lotion.—This useful and pleasant application for chapped hands is prepared by simmering one drachm of quince seed in half a pint of boiling water for ten minutes, straining the mucilage, and mixing one part with one part of inodorous glycerin and six parts of orange flower or rose water. A little borax may be added if desirable.—*Honey's Journal*.

De-Nicotized Tobacco.—Dr. T. Williams (*Chicago Medical Journal*) recommends smokers to place in the bowls of their pipes a little powdered tannin, or a sponge saturated with a solution of tannin. The smoke will thus be deprived of its characteristic aroma and all the vaporized nicotine, which is the intoxicating principle. At first the smoke will be entirely free from all taste and smell of tobacco, but as the sponge becomes charged with the nicotine the odor will reappear. By charging the sponge frequently the smoker may indulge in his habit as immoderately as he pleases without injurious effects.—*Med. Record*.

German Pharmacists publish analyses of patent medicines as the best mode of warfare against this increasing evil. Of those of real medical value they publish the proper value in money, which is invariably far below the price asked.—*Pharmacist and Chemical Record*.

Surgery.

Results of Tracheotomy.

Dr. Besiner reports to the Paris Medical Society of Hospitals (*Gay. Med.*) as follows:

“We are neither for nor against tracheotomy. We believe that in desperate cases it may be of service in prolonging life, and thus either giving our art the chance of interfering with success, and the organism the opportunity of regaining sufficient strength to combat disease successfully; but we dare not advise its performance in croup, in the way in which we advise paracentesis in pleurisy. The partisans of tracheotomy answer the fatal statistics of its opponents by saying that it is used only in cases of the worst kind, in which the disease, if left to the resources of the physician, would prove certainly fatal; and that, consequently, successful cases are really *resurrections*. We do not wish to oppose this way of looking at the subject, but we must say that during March and April there have been very few of these resurrections. M. Barthez, a great supporter of tracheotomy, has had thirteen cases in two months, eleven of which have died. M. Bergeron, out of nine cases, has had three successful ones. M. Roger has lost all the seven cases in which he has operated; one of them, however, died from the effects of fever contracted in the hospital.”—*Comp. Med. Science*, January, 1870.

Treatment of Ozaena.

Dr. Marsden, Quebec, gives the following treatment of this obstinate disease:

“During the past year I have treated two cases of ozaena—the one of seven or eight, and the other of ten years' standing—with carbolic acid topically, and permanganate of potash internally in one case, and iodide of mercury in the other (from an impression that there was syphilitic diathesis), and in both cases the cure was complete. I have another case under treatment—a man, aged 34 years, a railroad employé—and great improvement has followed the treatment from the commencement, and a permanent cure seems likely to be the result, which I attribute chiefly to the local application of the carbolic acid.”—*W. Marsden, M. A., M. D., etc. Place D'Armes, Quebec, Canada, February 21, 1870.—Med. and Surg. Reporter*, March 12.

Treatment of Enlarged Tonsils.—Dr. Ruppner (*Med. and Surg. Rep.*, Nov. 20th, 1869) recommends the use of the London paste (equal parts of caustic soda and lime) for the removal of enlarged tonsils. The preparation is made at the moment of using it, by adding a few drops of absolute alcohol, and mixing thoroughly, and applying it by means of a glass rod.

Ingrowing Toe Nail.—Dr. Babb (*Med. Times and Gazette*), has used, “with uniform success,” in ingrowing nail, a saturated solution of the persulphate of iron. Success depends upon the thoroughness with which a bit of cotton saturated with it is insinuated between the nail and the fungous flesh, the cotton being also turned back over the flesh on the outside.—*Medical Archives*.

Transfusion.—Professor Landois, of the University of Greifswald (*Wien. Med. Woch.*), states that transfusion in cases of hemorrhage has been performed 99 times—in 11 of which no successful result was possible. Sixty-five of the remaining 88 cases were successful, 20 unsuccessful, and in three the result was doubtful. This operation has been performed in cases of acute poisoning 13 times. The results were favorable in three cases—in eight unfavorable.—*Med. Record*.

Reproduction of Bone by the Marrow of Bones.—M. Gonjon has won the prize of five hundred francs, granted by the French Academy of Sciences, for demonstrating that the marrow of bones has the same power of reproducing bony substance as the periosteum—that engrafted elsewhere in the body it possesses the extraordinary quality of reproducing bone, as the author showed in a rabbit, in which bone had been made to grow under the skin by the transplantation of some of the animal's marrow!

Essence of Turpentine in the Treatment of Wounds.—It is stated, in *Archiv. Med. Belges*, that essence of turpentine has lately proved the only successful measure against the progress of hospital gangrene. All other substances were tried in vain. Thus, the wounds being well washed, they were dressed with lint steeped in essence of turpentine, and they very rapidly became healthy and healed.—*Am. Jour. of Med. Sciences*.

Urethritis Treated by Injections.—Dr. Patton (*Cin. Lancet and Obs.*, Feb., 1870) advocates the treatment of gonorrhoea by injections. His method is by the introduction of a fenestrated double cannula. Two to seven days may be required, passing twice daily, over the congested urethral mucous membrane, one quart of water containing from 3 ss to 3 ij of the acet. or sulph. zinc or tannin.

Danger of the Nasal Douche.—Dr. C. L. Pardee (*Med. Rec.*, Feb. 1, 1870) calls attention to the danger of throwing injections into the middle ear when they are used for the nasal passages. He shows that the Eustachian tube has such relation to the nasal passages that the injection readily passes from the nares into the tube. Several cases are reported in which grave symptoms supervened upon the use of the douche. He recommends that a posterior nares syringe be employed, which is equally effectual in cleansing the nares, and is attended with no danger.

Bleeding Piles.—Prof. Van Buren, of New York, says: "There is a popular impression that the bleeding from internal hæmorrhoids, which in many cases assumes an irregular periodical character—recalling the catamenial flow—is salutary, or at least that it seems a protection from more serious disease, as a sort of safety valve to the system. I am confident that there is no truth in this idea; at all events, I have arrested the flow in a good many instances, and I have seen none but good results from the interference. The anæmic head symptoms, such as ringing in the ears, and the like, often supposed to indicate a "tendency to apoplexy," have always promptly disappeared, together with other alarming sensations due to impoverished blood."—*Medical Gazette*, March, 19, 1870.

Hæmorrhoids.—Suppositories containing one tenth of iodoform are used by Dr. Hillairet against indurated hæmorrhoids; in a short time these tumors soften and wither away. Dr. Lallier employs the same suppositories against syphilitic ulcers.—*Eclectic Medical Journal*.

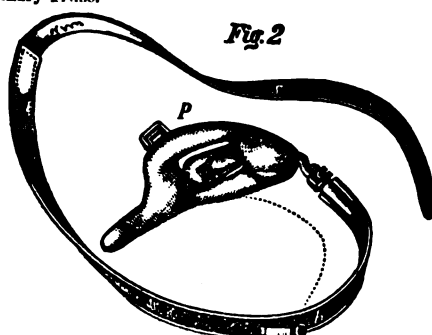
Delirium Tremens.—Prof. Rochester, of Buffalo, N. Y. (*Buffalo Med. Journal*), in a clinical lecture on *mania-a-potu*, states that when tincture of digitalis was first recommended in this disease he strongly opposed it, but his subsequent experience in the use of it has been quite happy. A patient who had not been improving was given one drachm of tincture of digitalis and twenty drops of tinct. capsicum once in two hours; two doses were taken, and at the time of the third dose he was sleeping well. In another case in the city digitalis succeeded where active agents had previously failed. The Bromides of ammonium and potassium may be given in doses of twenty grs. as a nervous sedative, or valerianate of ammonia used, and as a rule, opiates in some form. If the stomach is unable to bear opiates, hypodermic injections of one half a grain of morphine may be given, and in three hours be repeated, if necessary.—*Med. Record*, April 1, 1870.

Delirium Tremens successfully treated by Digitalis after failure of Opium.—Mr. Nankivell relates, in the *Med. Times and Gazette*, March 26th, 1870, two cases of delirium tremens successfully treated by digitalis after the failure of opium. Mr. Nankivell asserts that when opium has had a fair trial without producing sleep it is worse than useless to persist with it. In both cases the digitalis was given in drachm doses, repeated every three hours.

Chloral.—In a case of delirium tremens which seemed progressing very unfavorably, and in which morphia had failed altogether, sleep was procured within five minutes by gr. xxx of hydrate of chloral. The sleep lasted about an hour, and when the patient awoke he was quite composed and rational.—*Mr. H. T. Chapman, in Braithwaite's Retrospect*.

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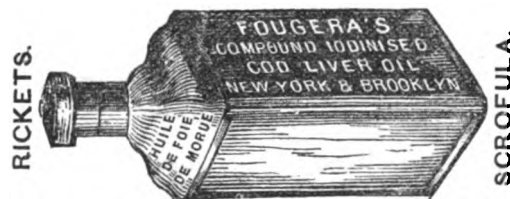
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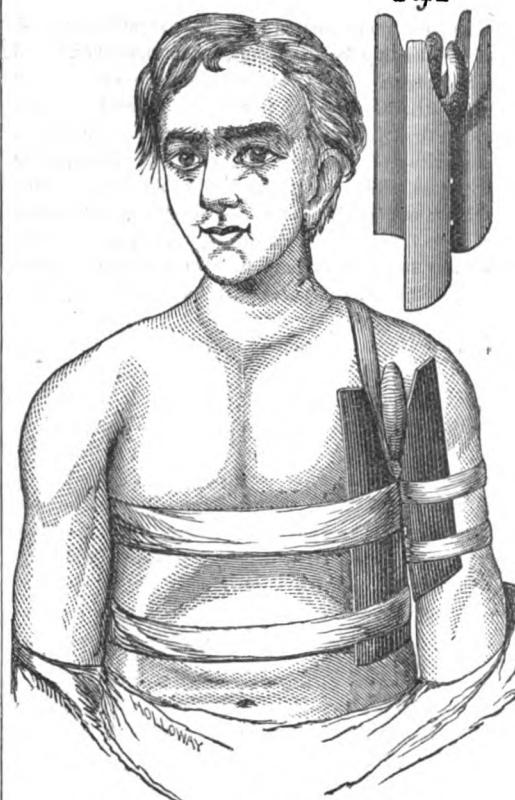
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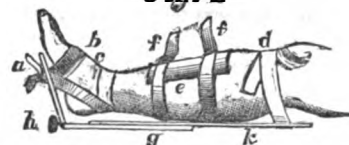
Fig 1



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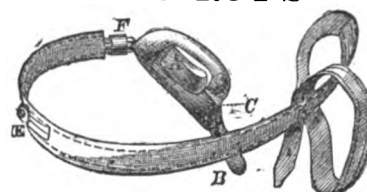
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Case of total Atresia Vaginal.

By DR. GÄRTNER.

A young girl, aged twenty-three, experienced for the first time menses in her 19th year, afterwards followed by bleeding from the anus, which, however, lasted but a short time. Nine months before she was received into the Catharine Hospital, in Stuttgart, a swelling began to form in the left nates, out of which, after an incision, a large quantity of pus and blood escaped. The opening did not close, while every four weeks blood issued from it. On examining the parts the external genitals were found to be but little developed; the labia majora were remarkably small, no trace of a vulva visible, the raphé hardly perceptible, while a smooth even formed, perfect occlusion.

Dr. G. made an incision into the median line, after which he inserted one finger into the opening, a catheter being introduced into the bladder and another finger into the rectum. The uterus was then pressed downwards, a pair of scissors inserted and these opened in order to enlarge the opening. After a few spoonfuls of a bloody liquid had escaped, Dr. G. found, to his astonishment, that the fingers passed into the bladder. The operation was then abandoned. The urine passed on the third day through the bladder, the wound soon closed, and the menses appeared at the regular time through the fistulous opening of the nates.—*Würtemb. Correspondenz, Blatt, XL, 2, 1870.*

Echinococcus of the right Kidney mistaken for an Ovarian Cyst—Extirpation—Death.

By PROF. O. SPIEGELBERG.

A woman, forty-two years of age, suffered from a swelling in the right hypogastrium for about sixteen months. On making an examination, the tumor was found to be moveable laterally, of the size of a man's head and fluctuating. It being considered an ovarian cyst, the operation of ovariectomy was resolved upon. On puncturing the tumor a clear, watery liquid came away, causing a doubt as to the correctness of the diagnosis. On going further extensive adhesions were found to exist between the tumor and the intestines which were separated with great difficulty. In order to ascertain the true nature of the swelling the sac was opened to the length of a finger, when two echinococcus membranes appeared. The operation was immediately interrupted, although a portion of the kidney had to be left in the cavity; twenty-two ligatures were applied. The same dressing as in ovariectomy was employed. The patient died after twenty-six hours.—*Archiv. f. Gynecol., I, p. 146, 1870.*

Dr. A. Oppenheimer has employed cold water applications in a series of cases of infantile diarrhoea, the age of the children varying from fourteen to four years. The results were very favorable—16 patients out of 20 recovered. The treatment is most efficient in recent cases, but almost useless in chronic diarrhoea. The following is his method: The child is enveloped in a bed sheet, which is first dipped into common well water, and then wrung thoroughly; the patient is next covered with a woollen blanket, and allowed to remain thus for one hour; after this cold compresses are applied to the abdomen. This process is repeated every three or four hours—in severe cases every hour. If symptoms of cerebral hyperæmia ensue cold applications must also be made to the head.—*Bayer, Intelligenz Bl., 1869, No. 24.*

Treatment of Croup by the Local Application of Lactic Acid.—A. Weber, of Vienna, has drawn attention to the use of lactic acid in the treatment of croup, as it has the power of dissolving fibrinous exudations. He recommends the direct application of the acid after the performance of tracheotomy, partially with a view to keeping the canula clear and partially of reaching the bronchial membrane, but by the use of this remedy he has not lost a single case of croup. Even in cases where

the difficulty of respiration was intense, where both inspiration and expiration were difficult, the signs were relieved in six or seven hours after the application of this remedy. A solution of 20 drops to the drachm of water is used as an inhalation every two or three hours; under its influence the cough softens and the symptoms yield. He suggests the use of a direct application of a solution through the perforation in the trachea.—*Med. and Surg. Journal, June 2, 1870.*

Use of Buttermilk in Rearing Infants.—Dr. Ballot, of Rotterdam, observes that this plan is now largely pursued in that city, and is commonly practiced in the country. He points out the variations that exist in ordinary cow's milk, and condemns the plan of feeding cows on the grain which is the refuse of distilleries.—*The American Practitioner, May, 1870.*

Treatment of Diarrhoea in Children.—M. Heller recommends the nitrate of bismuth, in doses of half a drachm to one drachm, in the diarrhoea of infants. At the outset this may be repeated every hour till the looseness of the bowels ceases, which usually happens within twenty-four hours. No ill consequences ever result from its employment.—(*Deutsches Archiv. f. klin. Med., Band vi. p. 107.*)—*The Practitioner, June, 1870.*

Syphilis and Dermatology.

Treatment of Syphilis.—Dr. Spender, of Bath, is in the habit of using in secondary syphilis, especially in affections of the joints, the following recipe: To four or five grains of the iodide of potassium add a drachm and a half or two drachms of the liquor hydrargyrum bichloride, of the late London pharmacopœia, to which any suitable salt of iron can be added when it is desirable.—*Philadelphia Univers. Journ. of Med. and Surg., June, 1870.*

Dr. Mitscherlich introduces a horse hair into such strictures of the urethra which proved impenetrable to the finest sounds used heretofore. By this means he succeeded in nine cases in reaching the bladder. By passing over the hair a very fine open bougie, he succeeded in gradually enlarging and finally curing the stricture. By uniting two, three or more single hairs through an elastic sealing wax, he obtained an assortment of bougies of the smallest size possible.—*Ally. Wiener, Med. Zeit.*

Treatment of Pruritus Pudendi.—M. Elleaume mentions several topical applications, with which he has, on several occasions, been able to overcome this troublesome affection. (1.) Frequent ablutions of the parts, followed by the application of starch, either injected in watery solution, or applied to the interior of the vagina in the form of powder, mixed with from one thirtieth to one eighth of its weight of nitrate of bismuth. (2.) Bathing the pudenda with a decoction of white hellebore, as recommended by Hartmann. (3.) The following ointment:

Morphiæ acetat. gr. j.
Chloroform. gr. viij.
Ol. amygdal. dulc. ʒ ij.
Adipis. 3 j.

M.—Fiat Ung.

S.—To be gently rubbed upon the parts several times daily. In some cases the addition of a little carbonate of soda will be found advantageous. (4.) Trousseau's lotion—one part of carbonate of potassa in twelve parts of water; of this a dessert spoonful is to be added to a pint of water, and used several times a day. (5.) A lotion of one part of corrosive chloride of mercury to 17½ parts of distilled water, with a little alcohol; of this a teaspoonful may be added to a pint of water. The strength of this and the preceding may be doubled after several applications. (6.) In obstinate cases, a solution of one part of nitrate of silver in 210 parts of distilled water. (7.) Slight cauterization with solid nitrate of silver in the vicinity of the clitoris. (8.) The application of a strong solution of perchloride of iron on compresses.—*Traité Élém. des Maladies des Femmes.*—*American Journ. of Syphilography and Dermatology, January, 1870.*

Pharmaceutical Cleanings.

Hypochlorite of Soda in Lead Poisoning.—Operatives who work in the manufacture of the various salts of lead, especially white lead, and persons who use the many popular hair tonics containing sulphur and acetate of lead, have remarked the dark precipitate which forms on the skin and its annexes. This is the black sulphuret of lead, and is quite sure, after a time, to be absorbed by the skin, and ultimately to induce saturnine poisoning. Dr. Mehn, in a recent number of the *Bulletins de Thérapeutique*, recommends, to remove this deposit, a bath or wash of the hypochlorite of soda—a means easy of application, and followed by prompt and immediate removal of the dark stains. He takes:

Dry chloride of calcium. 13 oz.
Crystallized carbonate of soda. 26 oz.
Water, about. 3 gallons.

Dissolve the chloride in the water, then add the soda dissolved also. A precipitate of carbonate of lime will be thrown down, and the supernatant fluid will be a solution of hypochlorite of soda. Add this to sufficient water for an ordinary bath, and pour in half a drachm of essence of lemon, eau de cologne, or other aromatic. The patient should remain half to three quarters of an hour in the bath, or should wash with it those parts of the body darkened by the sulphuret.—*Med. and Surg. Reporter.—Dental Cosmos, July, 1870.*

American Pharmacopœial Convention.—The sixth decennial convention of this body was held in Washington during the session of the National Medical Association. Professor Carson, of Philadelphia, presided. It was determined that the measures of capacity be abandoned in the pharmacopœia, and that the quantities in all formulas be expressed both in weights and equal parts by weight. The Committee of Revision was instructed to include some parts of the metrical system in the list of official weights and measures. The Committee, which will meet in Philadelphia, is composed as follows: Dr. G. B. Wood, Alfred B. Taylor, John M. Maisch, Dr. Robert Bridges, Philadelphia; Dr. Edward R. Squibb, New York City; Albert E. Ebert, Chicago, Ill.; J. Tarris Moore, Baltimore, Md.; G. F. Markoe, Boston, Mass.; Dr. John C. Riley, Washington, D. C.; Dr. Thomas Jenkins, Louisville, Ky.; Dr. Charles A. Lee, Buffalo, N. Y.; Dr. J. S. Wellford, Richmond, Va.; William T. Wenzell, San Francisco, Cal.; W. S. W. Ruscheuburger, U. S. Army and Navy.

On Suppositories.—By Herman Koch.

As the application of medicinal substances in the form of suppositories seems to be growing in public favor, I beg leave to make a few suggestions for the benefit of such practitioners as are not supplied with metallic moulds, and may not possess facilities for obtaining the same. The following plan for obviating the use of the latter, which I have followed for some time, gives a product of uniform size, shape and weight, and, besides being cheaper than metallic moulds, possesses the additional advantage of never spoiling the product by splitting or detaching pieces from the sides.

This is my plan: Take a piece of soft wood, cut in the rounded conical shape of a suppository, allowing a portion of the wood in the centre to extend beyond the larger end as a handle; roll a small square piece of waxed paper around the cone-shaped end of same, slanting off toward one of the corners. Secure the latter by a drop of mucilage, and the point by a vigorous twist between the fingers. Remove the paper and lay aside until the mucilage is dry, then reinsert the wooden cone, mark edge of same on the paper by encircling closely between thumb and forefinger, and lastly trim off close to said edge with a sharp knife. Keep the moulds thus formed in a cigar box, the lid of which has been perforated with two or three rows of small round holes, which will serve to keep them in a vertical position when used. I generally keep on hand three sizes of moulds, holding respectively one, two and three scruples, and mark the wooden cones accordingly. These moulds cannot be used more than once, but can be so readily reproduced that this is scarcely a disadvantage.—*Cincinnati, May, 1870.*—*American Journal of Pharmacy, July, 1870.*

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See Fig. 15.



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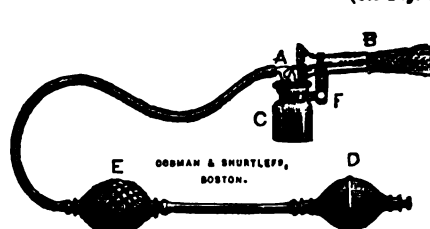


Fig. 5. Shurtleff's Atomizing Apparatus.
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R. Morph. sulph., gr. j; Ext. aconite rad. alc., gr. ii; ext. belladonna, alc., gr. iij; ext. hyoscyamæ, gr. iv. M. Ft. pil. no. viij. Signa—one every half hour till relief of pain.—*Northwestern Med. and Surg. Jour.* vol. 1., 1870.

To Remove Nitrate of Silver Stains.—M. Grimm states in a German journal that chloride of copper completely removes nitrate of silver stains from colored cotton cloth. It should afterward be washed with hyposulphite of soda, and then thoroughly washed with water. Such stains are more effectually removed from white cotton or linen cloth, by applying to it a dilute solution of permanganate of potash and hydrochloric acid, which is to be followed by washing with hyposulphite of soda and plain water. This process renders the use of the highly poisonous cyanide of potassium unnecessary.

Canquoin's Paste.—At a meeting of the Therapeutical Society, M. Mayet described a new formula for his celebrated caustic, which he had contrived after much investigation. In the new form it retains its consistence for any time, and admits of application in any mode desired. It is as follows: Chloride of zinc, eight parts; oxide of zinc, one; flour, dried at 100° C., seven, and cold water, one. Mix the oxide of zinc and the flour, dissolve the chloride of zinc in the water, and, having added the flour and oxide, rub in a mortar for ten minutes. The paste, so prepared, in a few hours acquires the requisite consistence, which it henceforth always retains. It may be preserved in a box covered with a layer of starch, but a stoppered bottle is preferable.—*Gazette Médicale*, Jan. 8th.—*N. Y. Med. Journ.*, July, 1870.

Additional Extracts.

Dr. F. Kuchenmeister, of Dresden, mentions, in a lengthy article on the treatment of phthisis, the good effects of the use of cold water. He thinks that life will be prolonged and perhaps preserved by preventing and stopping the hectic fever and colliquative discharges through the skin and alimentary canal. For this purpose he ascertains by the thermometer at what time the fever is at its height. The patient is generally in the morning (in consequence of the colliquative night sweat) free from fever till towards noon, the exacerbations being most intense between 1 and 3 P. M. About 12 M. the patient, if he has sufficient strength, is placed naked to the waist over a tub, while cold water is poured over him; if the patient is already weakened or of a delicate constitution he is enveloped in a wet sheet and covered with a blanket; this is repeated every half hour. At the same time an infusion of digitalis with quinine is administered three times every four hours. After this method has been employed for two or three weeks the fever is generally diminished, the pulse reduced from 100 to 80 in a minute, night sweats and diarrhoea disappear, while the appetite improves and the weight of the patient increases. The diet must consist of hydro-carbons and wine or beer. Besides this, great care must be taken by the patient not to expose himself to changes of temperature, as fresh colds are very dangerous.—*Oesterr. Zeitschr. f. Praktische Heilkunde*, Oct. 22d, 1869.

Dr. Wilks brought to the attention of the Clinical Society of London some cases illustrating the remarkable disturbance of the heart which often occurs in renal disease, more especially when this is the acute form. During the late prevalence of scarlatina and the succeeding nephritis he had met with several cases of the kind where the patient was seized with a sudden and violent palpitation of the heart, accompanied by all the usual distresses resulting from disturbance of the heart's action. The same symp-

toms might be observed in chronic renal disease, but in a less degree. Knowing that acute inflammation of the heart may arise in the course of scarlatina or nephritis he had always been on the watch for its occurrence, but in the present class of cases the disturbance of the heart's action subsided after a few days, without leaving any trace of an inflammatory process; only in one case did death occur. He believed therefore that the cardiac disturbance was of nervous origin and was a symptom of blood poisoning or uræmia. As regards treatment, Dr. W. had seen most of the cases in consultation, and thus different methods had been adopted. In nearly all stimulants had been administered, in consequence of the fears of momentary stoppage of the heart's action. Digitalis had certainly been of no avail. In one case henbane appeared to check the heart's action. His own opinion was that the condition named, being a result of uræmia, must be treated after the ordinary manner by diaphoretics, purgatives, etc.—*British Med. Jour.*, March 26th, 1870.—*Am. Jour. of Med. Science*, July, 1870.

Dr. F. K. Bailey recommends the following prescription as a good remedy for pruritus vulvæ:

R. Hyposulphit sodæ. 3 j.
Aque puræ, 3 iv.
Sulph. Morph., . . . gr. ij. M.
F. lotio. Use as a wash as by injection.

In the case of a lady in the last months of pregnancy, the same mixture was used without the least benefit till the addition of five drops of carbolic acid to the ounce produced immediate relief.—*Med. and Surg. Reporter*, June 4, 1870.

According to a recent report by the Assistant Superintendent of the Botanic Garden at Calcutta, the cinchona tree is successfully produced in Madras and Bengal. The number of plants at Darjeeling, on an area of 905 acres, exceeds 3,000,000, the increase during the past year being 673,654. The tallest plants grown there are nineteen feet high.

Dr. W. E. Whitehead, Assistant Surgeon, U. S. A., reports in the *Pacific Medical and Surgical Journal*, June, 1870, three cases of chronic dysentery treated successfully by large doses of ipecac. He administered from ten to fifteen grains three times daily, and, in addition, ordered sea bathing and a generous diet.

Dr. M. A. Loillier has repeatedly found sugar (½ per cent.) in the urine of persons suffering from mental derangement, without observing any of the other symptoms of true diabetes—hunger, thirst, emaciation, etc. He thinks that this is connected with the affection of the nervous system.—*Annales Médico-Psycholog.*, 1867, Ser. 5, II., 1-16.

Permanganate of Potash in Oxaluria.—Dr. H. S. Thorne relates (*Mich. Univ. Med. Jour.*, May, 1870) a case of oxaluria, in which he used the permanganate with the most happy result. Dr. Rose endorses its value. It should be given in half grain doses, dissolved in water thrice daily, and always on an empty stomach; for, in contact with organic matter, it is stated to be decomposed, yielding its oxygen to any subject that will receive it. It is given on the hypothesis that uric and oxalic acid occur as the result of deficient oxidation.—*Amer. Jour. Med. Science*, July, 1870.

Dr. Kraus describes the case of a tubercular ulcer, two inches broad, which he found in the œsophagus of a man 47 years old, which existed for three years, causing symptoms of an extensive stricture. A few days before death, two large caverns of the middle and lower lobe of the right lung perforated through the ulcer into the œsophagus.—*Allgemeine Wiener Med. Zeitung*, 1869, No. 19.

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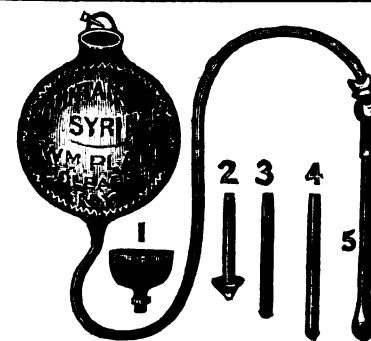
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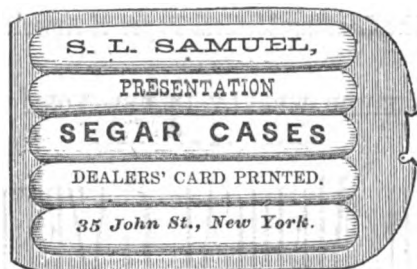
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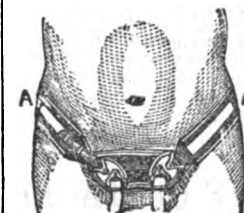
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THE Physician and Pharmacist

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[Written for THE PHYSICIAN AND PHARMACUTIST.]

On Fevers.

By DR. B. HATTIG.

[Continuation.]

The famous *Boerhaave*, trained in the school of the *Jatrochemists*, and instigated by the discovery of the circulation of the blood by *Harvey*, did not consider the increased warmth the main and most important symptom of the fever. He was the first who used the thermometer, and yet he arrived at the erroneous conclusion, that the temperature of the body in fever was objectively increased, but decreased in the chill; yet he deduced from it that, the chill being part of the attack of fever, the "*caliditas proeter naturam*" could not be the essence (*Wesen*) of the fever. He taught that the warmth of the body was less due to a chemical process than to a mere mechanical friction by the blood on the walls of the vessels, which, in the paroxysm being increased, was diminished during the chill, on account of the slackened circulation. The accelerated pulse, and the increased resistance in the capillaries, was never wanting in acute fever. "*The essence of fever consists of an irritation of the heart and the vascular system, and a morbidly increased interchange of the nerves and blood of the heart.*" This irritation of the whole vascular system as the cause of the fever we find again taken up by *Stoll*, and all representatives of the older school at Vienna; and even *De Haen* holds to this theory, who, by careful theometrical measurements, had shown that the temperature was invariably increased even in the chill, and in the absence of an accelerated pulse. The "*velocitas pulsus*," he says (perhaps out of love for his great teacher), is a pathognomic symptom of fever. This doctrine of the school of *Boerhaave* counted many followers even in the 19th century; for instance, *A. G. Richter*, *Baumgarten*, and even *Heidenheim* and *Lotze*, are not free from its influence.

It is very remarkable that even *Broussais*, whose system rests on quite a different foundation, defines fever as a result of the irritation of the heart, either primitive or sympathetic. But why quote more names, when every one of us has as good an opportunity to observe that *Boerhaave's* ideas have not yet been given up at the present time. How do we not hear of an irritation of the heart and vascular system as the cause of fever?

The third of this famous trio is *Fr. Hoffmann*, who, also trained in the school of the *Jatrochemists*, takes one step farther. He says the irritation of the heart and vascular system is caused by an irritation of their nerves, and this again by an affection of the nerve center, especially the spinal marrow. All muscular action, especially that of the heart, is called into existence by innervation. Fever is a spasmodic affection of the nervous and vascular systems, is accompanied by disorders in the functions of the organs, and is always the result of a nervous irritation. In this manner the liquids are driven to the interior, which produces, through an increased force of the heart and arteries, a stronger reaction to the surface, thereby releasing the spasm and causing the secretions to return to their normal state. While

placing thus the seat of the fever in the spinal marrow, he finds the locality of the first disorder in the different organs, mostly in the stomach and intestinal canal, a theory which we again find *Broussais* carrying to the extreme. *Hoffmann* was not the first who originated this neuropathological fever theory, for a famous philosopher and physician, *Borelli*, has had similar ideas, but *Hoffmann* developed this theory, and placed it more prominently before the profession, which, in good discoveries, is of more benefit to mankind than the invention itself, if not promulgated and allowed to be forgotten. No new idea originates at the present day, but somebody has, in former times, said something of the same meaning. The most enthusiastic and diligent follower of *Hoffmann's* ideas was *Cullen*, who, although somewhat influenced by *Haller's* theory of irritation, was the greatest and most one-sided of the solid-pathologists of all times, up to the present day.

[To be continued.]

Scientific Notes.

The Phenophthalmotrope.—This name has been given to a machine invented by Dr. Donders, of Utrecht, for elucidating the movements of the eye-ball. By means of it the mathematical analysis made by Prof. Helmholtz of the ocular movements may be practically demonstrated.

On the Breadth of Spectral Bands.—Lippich has given, in Poggendorff's *Annalen*, an explanation of the broadening and other variations of the spectral lines of luminous gases which he ascribes to changes in temperature. The law he claims to have discovered is that the ratio of the difference of the wave-band to the mean wave-lengths of such band is constant as the square roots of absolute temperature, and inversely as the square roots of their densities.

Photographing the Sun.—Prof. Winlock is now engaged in taking pictures of the sun of a somewhat novel plan. He uses a single lens object glass, 44 inches in diameter, having a focal length of 40 inches, made by Clark, of crown glass, and corrected for spherical aberration by means of an artificial star. The tube of the telescope points to the North, and the image of the sun is thrown in by means of a plate-glass reflector. This glass is not roughened or blackened on one side, because when that was done the heat of the sun distorted the plane surface. The slit is at the object-glass end of the telescope, so that when it is thrown across no dust is shaken on the plate, as frequently is the case in the usual way of working.

Oxygen Gas Prepared at the Ordinary Temperature.—Prof. Boettger states that when a mixture is made of equal weights of the peroxide of lead and barium and dilute nitric acid of a strength of 9 degrees baumé is poured thereon, a current of pure oxygen gas, free from ozone and antozone, is given off abundantly. This mixture of the two peroxides may be kept dry in a stopped bottle for any length of time.

Phosphate of Lime in Acetic Acid.

By WM. H. BRUCKNER, PH. D.

Not long since I had occasion to determine in a sample of undried Charleston, S. C., guano, the amount of phosphoric acid, and being out of chemically pure acetic acid, I requested my assistant to procure for me a small quantity at No. —, this city. Although the figures of the first and second determinations corresponded, they were unsatisfactory; those of the third, fourth, and fifth determinations differing largely among themselves, were equally unsatisfactory. Here follow the per centages: Nos. 1 and 2, 28.69 per cent.; No. 3, 26.75 per cent.; No. 4, 33.42 per cent.; No. 5, 30.22 per cent.

As the method used by me gives, when properly executed, very concordant results, it was thought advisable to test the *chemically pure* (?) acetic acid. Ammonia in excess was added, when a *copious, white, gelatinous precipitate* formed, which, on investigation, proved to be *phosphate of lime*. (The ammonia filtrate I omitted to examine. I doubt not that it contained lime originally combined with carbonic acid). It is easy now to account for the high per centages of phosphoric acid, and to explain the discrepancies the following is offered:

The hydrochloric or nitric acid solution of the guano (prepared in a proper manner), to which a known quantity of citric acid has been added, is supersaturated with ammonia, the precipitated bone-phosphate of lime dissolved in an excess of acetic acid, and the lime eliminated by means of oxalate of ammonia. Now, according as the excess of ammonia is large or small, the result will be influenced, not only by the amount of acid required to saturate an excess, large or small, but by the excess of acid as well; and, had not the quantity (1 gramme) of substance used for analysis been the same in each case, it would be natural to seek a cause here; for it is evident the smaller the amount of substance taken, the higher the per centage of phosphoric acid, and *vice versa*.

When pure acetic acid was used, the sample of Charleston, S. C., guano yielded of phosphoric acid 22.36 per cent.

The writer regrets that he is unable to give the percentage of phosphoric acid and lime contained in the acid, he having exhausted his stock in the foregoing experiments, and, on procuring some more, at the same place, it was free from impurity.

In conclusion, it remains to ask: Whence came the phosphate of lime? Supposing that it was intended to convert, with little trouble, an inferior acid into a superior one, would it be assuming too much to say that bone black was the medium?—*From Journal of Pharmacy.*

A New Theory of Sleep.—Dr. E. Sommer has contributed to the *Zeitschrift für Rationelle Medicin*, for 1869, a paper in which he promulgates the doctrine that sleep is nothing else than the result of a *deoxygenation* of the organism. According to his theory, the blood and the tissues possess the property of storing up the oxygen inhaled, and then supplying it in proportion to the requirements of the economy. When this store of oxygen is exhausted, or even becomes too small, it no longer suffices to sustain the vital activity of the organs, the brain, nervous system, muscles, etc., and the body falls into that particular state which we call sleep. During the continuance of this deep repose, fresh quantities of oxygen are being stored up in the blood, to act as a supply to the awakened vital powers. Rest produces, though in a less degree, the same effect as sleep in reducing the expenditure of oxygen.

On the Use of Tinfoil for Preserving Substances Liable to Change on Exposure to Air.

By ERNEST BAUDRIMONT.

Tin reduced to thin sheets has for many years been employed for preserving a great number of substances from the action of air and moisture. The thin leaves (foil) of this metal are essentially repellant of moisture. When cemented to the surface of damp walls, they protect the paperhangings which may be afterwards applied, and they are in like manner used for lining the interior of boxes and drawers in which dried medicinal leaves and flowers are kept. It has long been the practice to inclose chocolate in tinfoil, to prevent the fatty matter contained in it from soiling the paper which forms the outside wrapper; in the same way butter of cacao itself is preserved, and some sorts of sweetmeats, sausages, and cheese are among the articles similarly protected. Tobacco pouches are lined with tinfoil to preserve the flavor and humidity of the tobacco. Cakes of opium are kept in a moist and uniform state by wrapping them in this material, and bisulphate of soda is kept in the same way, for use in making artificial Seltzer water with Briet's apparatus. Lastly, on account of the opacity of tinfoil to the rays of light, bottles are coated with it for the purpose of excluding light from vegetable substances which would be injured by its action.

Notwithstanding the knowledge of all these facts, it might be said that the application of tinfoil for the preservation of substances liable to change is still rather limited, and there seems to be a prospect of its admitting of a more general use than has hitherto been made of it. At the same time there is an absence of any precise experiments for the purpose of determining in a scientific manner the degree of impenetrability of tinfoil. Having been engaged for some time in the investigation of this subject, I have obtained the following results:

For many years past I have observed that cacao butter, which readily becomes rancid, even when kept in bottles into which it has been introduced in the melted state, if the bottles be opened from time to time, does not undergo the same change when moulded in tablets and wrapped in tinfoil. This fact, which was confirmed by many observations, and could only be explained by assuming the impenetrability of tinfoil to atmospheric air, formed the starting point for some experiments in the same direction, which proved satisfactory. Thus, a piece of well burned quick lime, inclosed in a double wrapper of tinfoil, was exposed in the atmosphere of the laboratory by the side of another similar piece which was exposed without protection. While the latter became slacked, that which was protected by the tinfoil, and weighed 92.2 grams on the 1st of December, 1867, had only gained 3 decigrams in weight at the expiration of a month, and after being kept until the 25th of March, 1868, it had only increased to 94 grams. It had thus gained only 1.8 grams in four months. On being then taken out of its metallic envelope much heat was developed from absorption of moisture, and it fell into powder.

Satisfied by this experiment of the efficacy of tinfoil for preserving bodies from the action of air and moisture, it seemed probable that substances the most susceptible of change might be kept in the same way. It was found that substances so deliquescent as chloride of calcium and liver of sulphur, and efflorescent salts such as carbonate and sulphate of soda, remained almost unchanged when wrapped in tinfoil, increasing or diminishing only to a few thousandths of their weight in several weeks.

Other experiments were made of a more precise

character. It is well known that fresh lemons become rapidly dried and ultimately hard when exposed to the air, and that they also become perished and covered with mould. I had endeavored to prevent this drying and moulding by placing the lemons in close vessels, in dry air, in sand, and also in bran, but none of these methods proved efficacious. Thus, for example, in twenty-one days the lemons lost, on an average, 17.33 per cent. of their weight in sand, and 17.13 per cent. in bran. Experiments were made for the purpose of ascertaining the effect of enveloping the fruit in tinfoil, and also of coating it with a film of collodion. Some of the fruit prepared in each way, and some unprepared, was weighed, exposed to the air, and again weighed at intervals of a month. This method was applied to lemons and oranges, and the following results were obtained:

1. The unprepared fruit became rapidly dried. In two months the lemons had lost 42 per cent. of their weight, while the oranges, in the same time, had lost only 26 per cent.

2. Collodion, when applied to the fruit alone, exerted but a feeble preservative influence in retarding spontaneous evaporation. In two months lemons coated with collodion had lost 29 per cent., and oranges 22.5 per cent.

3. Tinfoil almost entirely prevents the drying of the fruit. In two months lemons lost only 1.58 per cent., and in three months 3.16 per cent. In one case, indeed, the loss was only 0.92 per cent. during the longer period. Oranges lost about 5 per cent. in two months. On the removal of the metallic envelope, the fruit was found to be as fresh and fragrant as when the experiments were commenced. These observations and experiments will tend to show the remarkable power of tinfoil in preserving substances inclosed in it from the influence of air and moisture derived from air, and may induce those who are interested in the subject to extend the application of this preservative means.—*Journal de Pharmacie et de Chimie.*

A Simple, Cheap and Efficient Substitute for the Stomach Pump.—By John T. Hodgen, M. D., Professor of Anatomy, Saint Louis Medical College.—About a year ago I had a case of stricture of the œsophagus so narrow that my patient could not swallow even liquids. To sustain life I resorted to a small stomach tube (a gum catheter, in fact), as a means of injecting liquid nourishment; to this I fixed the elastic tube of one of Davidson's syringes.

On one occasion the vessel containing the liquid happened to be higher than the patient's stomach, and I observed while the syringe was not being used, that the liquid continued to flow into the stomach—the action being that of a syphon. I at once, to test the syphon, substituted a simple elastic tube for the syringe, and found the stomach could be as readily emptied as filled. Thus I conceived the idea of using a syphon instead of a stomach pump, and have used the same in a case of poisoning recently, with the most complete success.

I attach four feet of India rubber tubing to a stomach tube, fill both with water by simply dipping it in the liquid, end first, then compressing the elastic tube between the thumb and finger to keep the fluid from running out, introduce the stomach tube, lower the outer end of the elastic tube, and the contents of the stomach pour out as readily as if from an open vessel. When the fluid ceases to flow, I dip the outer end of the tube beneath the surface of water, elevate the vessel containing it, and the stomach is soon filled; lower again the outer end of the tube, and the stomach is emptied. This can, of course, be repeated as often as is necessary.

The advantages claimed for this simple contrivance

are, that it may be almost always improvised, is of speedy and easy application, has no valves to become obstructed or deranged, and is less expensive than a stomach pump.

The same principle may be applied in injecting fluids into the bowels, as indeed it has been for injecting into the bladder, uterus, and vagina.—*St. Louis Medical and Surgical Journal.*

The Continuity of the Gaseous and Liquid States of Matter.—In a paper on this subject, read before the Royal Society of London, Dr. Thomas Andrews gives an account of various experiments made by him, during a series of years, upon gases, especially describing the combined effects of heat and pressure upon carbonic acid gas at temperatures varying from 13 degrees C. to 48 degrees C., and at the pressures ranging from 48 to 109 atmospheres. The temperature at which this gas ceases to liquify by pressure he finds to be 30.92 degrees C., or 88 degrees F., and this he calls the critical point. Although liquifaction does not occur at temperatures a little above this point, a very great change of density is produced by slight alterations of pressure, and the flickering movements are conspicuous which render fainter the surface of demarcation between the liquid and gas. As the direct result of his experiments, he concludes that the gaseous and liquid states are only widely separated forms of the same condition of matter, and may be made to pass into one another by a series of gradation so gentle that the passage shall nowhere present any interruption or breach of continuity. From carbonic acid as a perfect gas to carbonic acid as a perfect liquid the transition may be accomplished by a continuous process, and the gas and liquid are only distant stages of a long series of continuous changes. Under certain conditions of temperature and pressure, carbonic acid finds itself, it is true, in a state of instability, and suddenly passes, without change of pressure or temperature, but with the evolution of heat, to the condition which, by the continuous process, can only be reached by a long and circuitous route. The author discusses the question as to what is the condition or state of carbonic acid when it passes at temperatures above 31 degrees C. from the ordinary gaseous state down to the volume of the liquid, without giving evidence during the process of the occurrence of liquifaction, and arrives at the conclusion that the answer to this question is to be found in the intimate relations which subsist between the gaseous and liquid states of matter. In the abrupt change which occurs when the gases are compressed to a certain volume at temperatures below the critical point, molecular forces are brought into play which produce a sudden change of volume; and during this process it is easy to distinguish, by optical characters, the carbonic acid which has collapsed from that which has not changed its volume. But when the same change is effected by the continuous process, the carbonic acid passes through conditions which lie between the ordinary gaseous and liquid states, and which we have no valid grounds for referring to the one rather than to the other. Nitrous oxide, hydrochloric acid, ammonia, sulphuric ether, sulphide of carbon, all exhibited critical points when exposed under pressure to the required temperatures. The author proposes, for the present arbitrary distinction between vapors and gases, to confine the term vapor to gaseous bodies at temperatures below their critical points, and which therefore can be liquified by pressure, so that gas and liquid may exist in the same vessel in the presence of one another.

Spots and Stains.

Oil and grease spots on boards, marble, etc., when recent, may be removed by covering them with a paste made of fuller's earth and hot water, and the next day, when the mixture has become perfectly dry, scouring it off with hot soap and water. For old spots, a mixture of fuller's earth and soft soap, or a paste made of fresh slacked lime and pearlash, will be better; observing not to touch the last with the fingers.

Recent spots of oil, grease, or wax, on woolen cloth or silk, may be removed with a little clean oil of turpentine or naphtha; or with a little fuller's earth or scraped French chalk, made into a paste with water, and allowed to dry on them. They may also be generally removed by means of a rather hot flat-iron and blotting paper or spongy brown paper, more especially if the cloth, or one of the pieces of paper, be first slightly damped. Old oil and grease spots require to be treated with ox-gall or yolk of egg, made into a paste with fuller's earth or soap. Paint spots, when recent, generally yield to the last treatment. Old ones, however, are more obstinate, and require some fuller's earth and soft soap made into a paste with either ox-gall or spirit of turpentine.

Fruit and wine stains, on linen, commonly yield easily to hot soap and water. If not, they must be treated as those noticed below.

Ink spots and recent iron molds on washable fabrics may be removed by dropping on the part a little melted tallow from a common candle, before washing the articles; or, by the application of a little lemon juice, or of a little powdered cream of tartar made into a paste with hot water. Old ink spots and iron molds will be found to yield almost immediately to a very little powdered oxalic acid, which must be well rubbed upon the spot previously moistened with boiling water, and kept hot over a basin filled with the same.

Stains arising from alkalies and alkaline liquors, when the colors are not destroyed, give way before the application of a little lemon juice; while those arising from the weaker acids and acidulous liquids yield to the fumes of ammonia, or the application of a little spirit of hartshorn or sal volatile.

Stains of marking ink may be removed by soaking the part in a solution of chloride of lime, and afterward rinsing it in a little solution of ammonia or of hyposulphate of soda; or they may be rubbed with tincture of iodine, and then rinsed as before.

To Remove Nitrate of Silver Stains.—M. Grimm states in a German journal that chloride of copper completely removes nitrate of silver stains from colored cotton cloth. It should afterward be washed with hyposulphate of soda, and then thoroughly washed with water. Such stains are more effectually removed from white cotton or linen cloth, by applying to it a dilute solution of permanganate of potash and hydrochloric acid, which is to be followed by washing with hyposulphite of soda and plain water. This process renders the use of the highly poisonous cyanide of potassium unnecessary.—*Haney's Journal.*

Snake Poison and its Antidote.

The following communication appears in a recent issue of the *European Mail*, and throws an important new light on the therapeutics of animal poison:

SIR,—Having noticed of late the publication in both European and American journals of articles upon the subject, and particularly one under date March 2, 1870, under the heading, "The Cobra Question in India," I trust you will give publicity to this communication, on account of its importance; and am induced to ask for it a place in the columns of your journal, in the hope that it will afford to your

readers, in India more particularly, a knowledge of an antidote for snake poisons, which may claim to be specific, inasmuch as it has never been known to fail in a single instance during the past three years in different districts in this country, in which I have been able to induce its general adoption, and particularly by the *curanderos*, or curers (snake charmers). I have devoted no little time during the past twenty years to a study of the habits, peculiarities, &c., of poisonous snakes, and have made many experiments with their poisons, with a view to discover, if possible, specific antidotes to them, and have been so far successful as to be able to announce the law in therapeutics that "all animal poisons have their specific antidotes in the gall of the animal or reptile in which these poisons exist."

The bite of the *cobra*, or of any other poisonous snake or reptile, can be cured by administering a few drops of a preparation of the gall of the *cobra*, which should be prepared as follows: Pure spirits of wine, or 95 per cent. alcohol, or the best high wines that can be procured, 200 drops; of the pure gall, 20 drops; in a clean two-ounce phial, corked with a new cork; give the phial 150 or 200 shakes, so that the gall may be thoroughly mixed with the spirits, and the preparation is ready for use. In case of a bite put five drops (no more) of the preparation into half a tumblerful of pure water; pour the water from one tumbler into another, backwards and forwards several times, that the preparation may be thoroughly mixed with the water, and administer a large tablespoonful of the mixture every three or five minutes until the whole has been given. In case the violence of the pain and hæmorrhage or swelling of the bitten part should be but slightly alleviated after the whole has been taken, repeat the dose, prepared with the same quantity of the preparation in the same way, and administer as before. In curing upwards of fifty cases of snake bites I have never been obliged to repeat the dose except in two instances, and have never lost a case. The *cobra* poison is more deadly than that of a great variety of snakes found in South America, of which may be named the *Cascabel*, or *Rattle-snake*; *Boqui-dorada*, or gilded mouth; *Mapana-sapo*, or frog-headed Mapana; *Mapana-fina*, or *Lachasis*, *Niger*, *Birri*, and *Verrugosa*, or wart snake. The poison of all the severities produces death (under certain conditions—atmospherical, physical, climatical, and electrical) in from fifteen minutes to two or three hours; but it is found that the gall of each variety (administered as previously indicated) is the perfect antidote for its own poison. The gall of the most deadly kind may be used in cases of bites of those less virulent, and is also applicable in cases of bites of the centipede, scorpion, stingray, star-lizard, or *Lacerta stella*, and is also very effective in dog-bites. The native curers use a tincture of a plant called *Alconito*, or *solobusta*, for bites of the *Cascabel* and *Boqui-dorada*, with very good success in cases of bites, and also a prophylactic, by inoculation (in the point of the shoulder), for preserving themselves harmless against these poisons. For this purpose incisions are made at the lower point of attachment of the deltoid muscles, in the same manner as for vaccination, and into these are introduced small pellets of cotton (of the size of a millet seed) saturated with an alcoholic tincture of the *Alconito*. Care is taken to keep within doors and out of the wet and dew for from fifteen to twenty days, after which period the inoculation is concluded. Of the efficacy of this process, I can say that I have repeatedly tested it on dogs, in a district where every dog not inoculated, if bitten by a snake, invariably dies, and have never known an inoculated dog to show any inconvenience from the bite of the most venomous

viper. This plant is the *Aristolochia Columbiana*. In Brazil the curers use the tincture of the *Aristolochia milhoms*, or *Arist. grandifloras*. In the United States the Indians use the *Serpentaria*, or *Aristolochia Virginiana*, and it is more than probable that the *Arist. Colo.*, or the *grandifloras*, is to be found in India.

During my research in this branch of natural history I have collected much interesting and valuable information, all of which I have incorporated in a small work that will shortly be published in English; but the reports of such a frightful number of deaths from snake bites as English journals record as having occurred during the past year in certain parts of India, have led me to address this letter to you, that the truth of the efficacy of this antidote for snake bites may be tested by every person who takes any interest in the matter, and that these tests may be so effectually made that a point of such vital importance as the discovery of the specific antidote for these poisons may be known throughout the world.

I indulge the hope that I may see repeated corroborations of the results of my own humble labors in this specialty through so many years.

Your obedient servant,

S. B. HIGGINS.

State of Magdalena, April 10, 1870.

—*Journal of Pharmacy from Chem. and Drug., Lond., June 15, 1870.*

Cutting off Necks of Bottles, etc.

The necks of the large retorts and flasks are cut off by means of a ring of iron fastened to the end of an iron rod, several of which rings of various sizes would be found very useful. A ring of the proper size for the object being chosen, it is brought to a full red heat, and stuck upon the neck which is to be cut. After a minute, it is taken off and a few drops of cold water or a wet stick is applied to the heated glass, upon which the neck immediately flies off.

Another and better method of cutting off the necks of thick glass vessels, is by means of pastile glass cutters, which are prepared as follows: Take of gum arabic 1 part, of gum tragacanth 1 part, and digest them in hot water till you obtain a slimy mass. The mixture must make 10 parts.

Add one-sixth part of gum benzoin dissolved in the smallest possible quantity of alcohol, and 10 or 12 parts of extremely well pulverized charcoal. Mix the whole intimately together, work the mass into a stiff paste, roll it between two boards rubbed over with charcoal powder, into cylinders quarter inch thick and eight inches long, and let them dry.

It is of importance to have the charcoal thoroughly pulverized and sifted, and well kneaded with other ingredients.

These pastile glass cutters, when heated at one end, continue to burn like ordinary fumigating pastile, producing a red hot point, by means of which a crack in a glass can be led in any direction with as much certainty as a line can be drawn with a pen. When the glass that is to be cut has no crack, it is necessary to make a scratch with a file, and then spring it open by approximating the heated pastile. When you wish to cut off the neck of a flask so as to obtain both pieces of the vessel in an unbroken state, or when you wish to cut a flask across the middle without first commencing at the edge, and so bringing down a vertical split, you obtain your object by first making a scratch or cut on the flask with a file, in the direction of the desired fracture. You then hold the lighted pastile close to the glass, and at a little distance (the eighth of an inch) from the end of the scratch, and in the direction in which you wish the split to be extended, and you push the pastile

slowly toward the scratch till the split takes place, which generally is to the extent of the heated portion. You then again remove the pastile to the eighth of an inch from the end of the split, and again push it toward the split; upon which a second extension takes place. The same operation can be repeated till the split has taken the whole course you desire it to do. It is useful to make an ink line, or to tie a thread round the vessel, to guide the pastile in a right line. With a little exercise you will become able to cut glass in this manner as straight and as neatly as by the use of a rule and diamond. When the pastile is first lighted it must be allowed to burn to a point before you attempt to cut glass with it. When you have finished your operation, you extinguish the fire by plunging the pastile into dry sand.

How to Bore Holes in Glass.—Hard steel tools, such as drill's, files, rasps, etc., cut glass with extraordinary facility when thoroughly wetted with a solution of camphor or oil in turpentine. With a sharp three edged drill, and a drill bow, holes can be bored easily, and still better when the drill is fixed on a lathe, as rapid motion is useful. The drill can nevertheless be effectively used by the hand alone, but an abundant supply of the camphorized oil of turpentine must be applied to the cutting tool during the operation. In the same manner, a hole, when once made, can be readily enlarged by a round file, the ragged edges of tubes or glass plates can be removed by a flat file, female screws can be cut in thick plates of flint glass, flat window glass can be sawed by a saw made of a watch spring; and, in short, glass, brittle and refractory as it is, yields so effectually to the action of camphorized oil of turpentine as to prove almost as readily workable with cutting tools as brass itself.—*Haney's Journal.*

Test for Impurities in Alcohol.—The use of impure alcohol for the solution of aniline dyes has a marked effect on the colors. If empyreumatic oil is present, much of the brilliancy is destroyed, and the presence of aldehyde has a still more prejudicial effect, one quarter per cent. being sufficient to decolorize the violet dye in a marked degree. A simple test for ascertaining the purity of the alcohol is to put some in a test tube with a little piece of caustic potash, when, if impure, the alcohol will become more or less yellow. Another test is to make two solutions of the color of the same strength (1 in 50), one with alcohol of known purity, and the other with the suspected alcohol, and then compare the intensity and shade of the solutions.—*Ind. Med. Jour., Aug., 1870.*

A New Test for Albumen.—Dr. C. Meymott Sidney, lecturer on chemistry at the London Hospital, has noted that a mixture of equal volumes of acetic and carbolic acid is a far more delicate test for the presence of albumen than any other method that has been proposed. In using this test with urine it is necessary to shake the test tube, as some opacity is produced by the mere admixture of fluid, which, however, disappears on agitation.—*Brit. Med. Jour., April 9, 1870.*

Passage of Gases in the Body.—At the concluding lecture of his course on experimental medicine for the session 1869-70, Dr. Richardson made (*Lancet*) "a very curious experiment, which appears to show that there is a direct and almost immediate passage of substances in the gaseous form through all the tissues of the body, and especially through the coats of veins. Dr. Richardson introduced a fine tube through the nostril of a rabbit into the cranial cavity. Air, or carbonic acid gas, pumped through this tube, instantly made its appearance in the right cavities of the heart. The carbonic acid darkened the blood and

stopped the systolic action. Atmospheric air rendered the blood of the right side arterial, and restored the systole."—*Dental Cosmos., Aug., 1870.*

Mechanical Division of Mercury.—Mr. J. Calvin, of Texas, communicates the following process to the *Chicago Pharmacist*; it is headed "Quick way of Extinguishing Mercury." He states that on shaking tincture of Tolu with mercury (one fluid drachm of the tincture with three ounces of mercury) in a strong two-ounce vial, the whole of the mercury was reduced to a state of minute division, which is easily mixed with fatty or other ingredients.—*Med. Press and Circular.*

Incompatibility of Sulphate of Quinia and Digitalis.—A physician having prescribed the syrup of digitalis, of the Codex, and directed the addition of acid sulphate of quinia, observed a precipitate in the bottle. Presuming a mistake had been committed by the apothecary, he sent the mixture to a chemist for examination. The physician was told that his prescription directed the mixing of incompatibles, the tannin of the digitalis combining with the quinia to form an insoluble tannate. The chemist, M. Stan. Martin, states that the alkaloids should be administered uncombined with other articles, and, when required in solution, water should be the vehicle.—*Journal de Pharmacie et de Chimie.*

Strychnia as an Antidote to Chloral.—M. Liebreich, after a number of experiments with rabbits, arrives at the conclusion that strychnia, administered hypodermically, acts as an antidote to poisonous doses of chloral.—*The Pharmacist.*

Parchment Paper.—To convert paper into vegetable parchment, immerse it for a few seconds in a cold mixture of one volume water and two volumes sulphuric acid. Wash out rapidly by plunging in a large quantity of cold water, and finally remove all traces of the acid by further immersion in water to which a small quantity of ammonia has been added. To prevent the tendency to contract when drying, it should be attached to a frame while wet, or allow it to dry under a press. Paper prepared in this way is very transparent, and can be used for copying by tracing. It is extensively employed as a substitute for parchment made from sheepskin in diplomas, certificates, patents, and for envelopes.—*Chemical News.*

Magic Lantern Pictures by a New Method.—Mr. Shepherd Holman, of the Franklin Institute, Philadelphia, has devised the following method of preparing pictures for the magic lantern: A sheet of gelatine, such as is used for tracing, is securely fixed over an engraving, and with a sharp steel point (made by grinding down the end of a small round file), the lines of the original are traced pretty deeply on the transparent substance. Lead pencil or crayon dust is then lightly rubbed in with the finger, and the picture is at once ready for use. The effect of these drawings in the lantern is said to be excellent.

Isinglass.—J. L. Souberaine, who has recently examined the different varieties of this article, points out these distinctions: Russian isinglass dissolves very rapidly in hot water, seldom leaving over 2 per cent. of insoluble residue; it is pleasant to the taste, and yields a firm and transparent gelatine. Bengal or Indian isinglass dissolves readily, but leaves a much larger proportion of residue—from 7 to 13 per cent.; it often has a fishy taste, and its gelatine is not clear. The gelatine obtained from Brazilian isinglass is opaque and acrid. The isinglass prepared in China is seldom exported.

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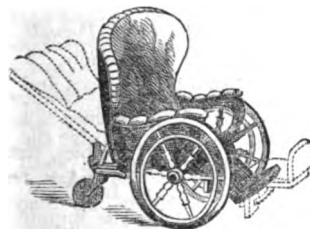
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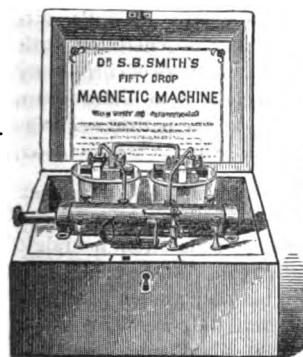
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I fully concur in the above statement of Prof. Clarke.

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NEW YORK, NOVEMBER, 1870.

All communications of a business nature, including subscriptions, should be sent to REED, CARNRICK & ANDRUS, 122 Liberty Street, New York. All other communications should be addressed to the Editor, 122 Liberty Street.

We shall mail the present number of THE PHYSICIAN AND PHARMACEUTIST to a number of Physicians and Druggists who are not subscribers; these will do us a favor by showing the journal to their neighbors.

We would especially request druggists to be kind enough to present it to the notice of physicians in their immediate vicinity.

The edition of THE PHYSICIAN AND PHARMACEUTIST, which is regularly issued, is so large that it affords special advantages to publishers and dealers, in having a knowledge of their issues and apparatus brought to the notice of many physicians who may not be subscribers to the medical journals published in their own locality.

Bibliography.

The Raising and Education of Abandoned Children in Europe. With Statistics and General Remarks on that subject. By ABRAHAM JACOBI, M. D., Member, etc.

Dr. A. Jacobi, after describing the foundling institutions in the different European countries, gives very elaborate statistics concerning death rate, etc. He then mentions the results attained in the Hospitals for children in this city, where, in spite of the greatest care, the death rate of the new born is, as in Europe, excessively large. He is of the opinion that, in order to diminish the number of deaths of abandoned children, they ought to be, until the sixth year, given in charge of private parties in the country, instead of being crowded together in Asylums situated in large cities. After the sixth year the children ought to be placed in proper institutions for the purpose of securing them a good education.

The Indigestions or Diseases of the Digestive Organs Functionally Treated.

By T. H. CHAMBERS.

Third American Edition.

The third edition of this highly instructive work lies before us, and we are happy to again recommend it to our readers. The new edition shows an increase in the number of cases, while the general arrangement has remained the same. The author treats first of acute and chronic indigestions, and defines in a very lucid manner the meaning of indigestion, by

proceeding from the action of the stomach in a state of health, which, in order to be considered normal and healthy, must be quick, complete and easy. If this is not the case, in abnormal state, indigestion exists, digestion being slow, defective and painful. It is easy to understand that, if the stomach retains so much of a former meal, it is not in a fit state to receive the new one, which is needful for the sustenance of the body, and diseases like anæmia and debility must be the consequence.

It is also obvious that, digestion being defective or painful, the ingesta must pass unchanged and with pains through the intestinal tract. Starting from these views Chambers now treats of the several processes of disease, the pathology and treatment, and, having a large material on hand, enumerates, in a very clear manner, the symptoms of gastric derangement, both chronic and acute, showing how an insignificant affection, neglected in the beginning, may in time become very serious, (page 47, case xxiii).

The third chapter on the indigestion of various foods is very valuable, because it shows not only how to ascertain the exact cause of indigestion, but it also explains what kind of nourishment may be given to the convalescent in order to prevent a second attack.

Answers to Correspondents.

Enquirer, Evansville, Wis.—Do you know of a process to solidify castor oil so as to make what is known as "transparent pomade?"

Transparent pomade is made by adding to castor oil a solution of soap in strong alcohol. We forget the exact proportions, but the following formula, with slight modifications, ought to answer:

R Common soap, or better still, transparent soap shavings, quite dry: $\frac{3}{4}$ ij; alcohol 95° $\frac{3}{4}$ viij; hot castor oil $\frac{3}{4}$ viij to $\frac{3}{4}$ xij. Essential oils Q. S. for perfuming. Digest the soap with the alcohol by means of a sand bath, till dissolved. Filter while warm; add the castor oil hot, and the essential oils; pour into warm bottles, and cork tightly.

If you wish to obtain what is called "crystalline pomade," instead of transparent soap, use Castile soap thoroughly dry; after a few days the pomade will be speckled with a number of crystals of stearate of soda.

Crystalline pomade may be also prepared by melting, with the help of heat spermaceti with 8 or 4 times its weight of oil of almonds.

E. B., Lafayette, Ind.—Extemporaneous chalk mixture. Our correspondent has tried various recipes for this preparation, and is satisfied with none of them, as some do not represent exactly the *mistura creta* V. S. P., and others do not keep or contain various foreign substances, such as alcohol or the inevitable glycerine.

Here is a formula which we have used many years with complete satisfaction:

R Prepared chalk, one Troy ounce; powdered sugar; gum arabic pulv., aa half a Troy ounce; oil cinnamon, one drop. Mix thoroughly and keep in a stoppered bottle. When wanted for use, take one drachm of the powder for each ounce of the mixture prescribed, drop it into the bottle where the necessary water has been previously measured, and shake well. No mortar is required; only if anything else is prescribed in combination with the chalk mixture, this should always be prepared first, and then the syrups, tinctures, etc., added to it.

K. D., Delaware.—To Destroy Ants without Poison.—The question is, how to destroy ants that are infesting a closet where meats, preserves, etc., are kept. No poison of course is to be thought of. A friend

gives us this ingenious method: "Moisten a coarse sponge with sweetened water and leave it a short time in the closet; the ants will soon fill every part of it; soak it then in boiling water and repeat the dose *usque ad exterminationem*."

F. C., Va.—In attempting to prepare *liq. ammonia acetatis* with carbonate of ammonia and a sample of acetic acid obtained in Philadelphia, our correspondent was surprised to get a jelly instead of a clear liquid; he is at a loss to know what is the cause of it. The acetic acid used had probably been filtered by the manufacturer or dealer through impure animal charcoal. Hence the phosphate of lime which was precipitated in the form of a jelly on the addition of carbonate of ammonia. F. C. will find the subject mentioned more at full in another part of this number.

D. B., Hagerstown, Md.—How to Color Pomade Green.—This may be effected in various manners. A good way is this: Take of spinach leaves green and fresh Q. V.; bruise in a wooden or stone mortar; add a little cold water and express the juice; receive the juice on a paper filter or a muslin strainer and wash well with cold water; dry slowly, away from sunlight. The green substance thus obtained is impure chlorophyll, which will impart a very delicate green color to grease or any fatty body by a simple maceration with it at a gentle heat. When the requisite shade is obtained, the grease needs only straining. This color is not *fast*; it fades when exposed to the direct rays of the sun; but it does not *stain*.

Another green may be obtained by mixing with the grease indigo or ultramarine in very fine powder and some yellow pigment, such as yellow ochre or picric acid; grease may also be colored green with chrome green finely powdered. All these are *fast* colors; they are also harmless, but they *stain*.

Medicine.

Dr. Arthur Scott Donkin, in the *London Lancet*, speaks in the highest terms of the success he has had in the treatment of diabetes, Bright's disease, Addison's disease, and fatty degeneration, with a diet *exclusively* of skim milk. In cases of corpulency he says it is far more efficacious than Bantingism, besides being more agreeable to the patient.—*Pacific Med. and Surg. Journal*, Sept., 1870.

Tic Douloureux Cured by Galvanism.—An interesting case is reported from the practice of Dr. Wilks, of a patient who first began to suffer from neuralgic pains in the left side of the head. At first the pains were slight and transient, but they gradually became worse and more frequent, until they were now excruciating, and brought on by slight causes, such as blowing the nose, talking much, or eating. The nerve involved appeared to be the first division of the fifth. She had lost all her teeth on that side; she had never had rheumatic fever or ague, and was in other respects in good health. She was ordered three minims of tincture of aconite three times a day, but this produced no improvement. On February 1st she was ordered a drachm of chloride of ammonia every six hours. On February 7, being no better she was ordered half a drachm of the hydrated peroxide of iron and three grains of sulphate of quinine every four hours. On February 11 she was no better, and was ordered fifteen grains of bromide of potassium every four hours. On February 17 she was no better. All medicine was ordered to be omitted, and a continuous current of galvanism from twenty-five cells to be applied: after this she gradually improved. On February 28 she was much better. On

March 18 she went out, saying she was quite well. (See *British Medical Journal*, July 9).—*Practitioner*, Aug., 1870.

Neuralgic Pill.—Dr. T. C. Osborne says that the subjoined combination is very effectual in cases of neuralgia: zinci cyanuretum, gr. vj; quinae sulphas, gr. ix; morphiae sulphas, gr. iss; ext. belladonnae, gr. iij; Ft. pilulae, No. vj. S. One pill every six hours, until the pain is relieved.—*New Orleans Journal of Medicine*.

Neuralgia of the Jaw Bones.—Professor Gross says: "There is a form of neuralgia of the jaw bones which, as far as my information extends, has not hitherto been described. Its seat is in the remnants of the alveolar process of edentulous persons, or in the structure, and in the overlying gum, and is met with chiefly, if not exclusively, in elderly subjects. It is more common in the upper than in the lower jaw. The part affected is usually very small, often not exceeding a few lines in extent. The soft tissues around do not seem to suffer, at least not in the same degree; on the contrary, the morbid action is generally limited to the osseous structure. In rare instances there may possibly be some involvement of the gum, which is nearly always exceedingly hard and dense, grating more or less under the knife, and adhering with extraordinary firmness to the atrophied alveolar process beneath. The pain is generally paroxysmal, coming on in fits and starts, very much as in ordinary neuralgia, the slightest causes being sufficient to provoke it, as talking, mastication, the contact of hot or cold fluids, deglutition, or mental excitement. Sometimes it is momentary, coming and going with the rapidity of lightning; occasionally it lasts for hours together; and cases occur, although they are rare, in which it continues, with but little mitigation, for an indefinite period. The pain varies in character; thus it may be sharp and darting, dull, heavy, aching, boring, or gnawing. Pressure generally relieves rather than aggravates it. Now and then, when it is uncommonly severe, there may be more or less spasm of the muscles of the face, but this is rare. The pathology of the affection seems to be compression of the minute nerves distributed through the wasted alveolar process, dependent upon the encroachment of osseous matter upon the walls of the canals in which they are naturally inclosed. The disease usually comes on gradually, and proceeds from bad to worse until, in many cases, the suffering is rendered nearly intolerable. The only effectual remedy is excision of the affected alveolar process. No particular attention need be bestowed upon the after treatment. A mild course of chalybeate tonics may be required when the patient is anæmic, or affected with flatulence and indigestion."—*Amer. Jour. Med. Sciences*.

Dr. Thoroughgood, in an article published in the *London Practitioner* (Baltimore Reprint), upon the use of arsenic in certain forms of dyspepsia, says:

"So far as my present experience goes, I should say that the more purely local the gastric symptoms, the better is the chance of arsenic doing good. When there is much general exhaustion of system, with disordered urine or manifest hepatic congestion, arsenic is not of much promise as a remedy."

"The small, irritable tongue, with projecting papillae and yellow or grey fur, indicates arsenic; vomiting and burning pain after food also point to the use of this drug. The dose must be a very small one—say one drop of Fowler's arsenical solution, and if this does good, on no account should the dose be increased in hope of forwarding the cure. Whether the medicine be given before or after meals does not

seem to me an essential matter, but my preference is rather in favor of its use before the food.

"Finally, I would mention that I have generally made it a rule to give to the patient half an ounce of the infus. calumbæ alone three times a day for a week, and then I add the drop of arsenical solution; when a patient has been taking a variety of medicines it is well to do this, and then there is no mistake as to the effect of the arsenic."—*Nashville Jour. of Med. and Surg.*, Sept., 1870.

Dr. W. Stewart, in the *Lancet*, states as the result of a large experience in India that where hepatic abscesses burst through the right lung, recovery is not uncommon under ordinary restorative and expectant treatment, while in places where the discharge took place through other channels, "as into the transverse colon, stomach, etc., or externally through the parietes of the thorax or abdomen—whether naturally or by artificial opening," he has not met with a favorable termination. He hence concludes that "prognosis is favorable in uncomplicated cases, when the abscess makes its way through the lung. In such cases the abscess occupies the upper or convex portion of the liver, near the suspensory ligament; adhesive inflammation occurs on its outer surface; the diaphragm forms a part of the sac, and its substance is gradually removed by progressive absorption. If, at the same time, adhesion takes place between the diaphragmatic and pulmonary pleura, the abscess will open into the parenchyma of the lung, and be discharged more or less completely by expectoration. In such cases, the matter may escape by a small opening directly into a bronchial tube, or filter through immeasurably small orifices into the air cells; and the process of filtration and aspiration, if I may so express it, following on the respiratory acts, may be the reason why such abscesses do not have an unhealthy action—ordinary atmospheric air carrying "septic germs" being excluded—the products of respiration alone taking the place of the expectorated matter, and being continually renewed by the same process."—*Med. Gazette*, June 4, 1870.

The Revue Therap. publishes the extract of a medical essay on sewing machines. From six hundred and sixty-one observations the following conclusions are made:

1. The work on a sewing machine has no other effect upon the system of locomotion than any other exceeding work of certain limbs with the exclusion of other ones.
2. The troubles of the stomach, so frequently met with in Paris, are not due to sewing machines.
3. The troubles of the respirative organs are not more frequent.
4. An influence on the nervous system is not stated. The uneasiness in the commencement ceases, and the girls are soon accustomed to their use.
5. In regard to the excitation of the sexual organs, it must be said that some observations already published have no value. An exact examination proves the former practice and demoralization a very reason of the alluded sexual excitement.
6. Metrorrhagia, miscarriage, peritonitis and leucorrhœa are not oftener found.
7. Machines, with isochrone treadles, are preferable to those with alternating ones.—*Indiana Jour. of Med.*, Sept., 1870.

Dr. Stark reports a case of hydrophobia in a woman, 45 years of age, who was bitten by a suspicious dog in the right hand, July 7th, 1868. The wounds were cauterized and Calomel administered. The

first morbid symptoms appeared September 12, without any change taken place in the cicatrix. They increased rapidly; death ensuing on the 16th, after an apparent improvement was observed. No section of the body was permitted. Chloroform was administered during the last two days, with great difficulty, however, as the first inhalations always caused violent attacks of suppuration. The patient derived but little benefit from it.—*Centralblatt f. d. Med. Wiss.*, No. 19, 1869.

A Cure for Somnambulism.—Two instances of somnambulism being perfectly cured by means of bromide of potassium are recorded in the *Paris Les Mondes*. A woman, 24 years old, who had attacks two or three times a week for 10 years, after taking two grammes of bromide of potassium in 75 of water daily, the dose being gradually increased to six grammes, was entirely cured at the end of two months. The other case, a girl of eight years, after taking one gramme morning and evening for a short time, was completely restored to health.

Potatoes, as usually cooked, are probably the most objectionable article of food which can be presented to a weak digestion. The starch granules are but half ruptured, and are held together by cellular tissue, so that they are reduced by mastication only into small pellets, which require long soaking in gastric juice before they can be broken up sufficiently for solution.—*Chambers on Indigestion*.

The Effect of Aloe.—The soluble alcaloid in aloes (aloin) is a bitter tonic, and the purgative power resides in its insoluble resin. It is very moderately eliminative; in small doses it but adds to the solid excreta of the colonic glands, and elicits matter feculent in smell and of consistent form; whilst, at the same time, it strongly restrains, by its bracing bitter, the formation of mucus. See its effect on moist piles, —how it dries them up and makes them smart—and we may judge from this what its action on the gastro intestinal mucous membrane is. At the same time, by the more vigorous peristaltic movement, and by the solid mass passed along the gut, the already existing mucus is cleared away. Its work is directly to restore nervous activity in the alimentary canal.—*Ibid*.

The old remedy for colic, of a bullet or quicksilver taken into the stomach, has been revived, in a modified form, by Dr. Maydieu, of Argent, France. In the *Journal de Med. Pratique*, Dr. M. declares that, after seventeen years of the ordinary treatment, in which he always failed, he has been invariably successful in the twelve cases which he has treated with shot. He mixes No. 5 shot, after careful washing, with olive oil sufficient to cover them, and gives a dessertspoonful every half hour. In five or six hours the vomiting ceases, gases are expelled, and the bowels are moved. Warm baths, fomentations, and injections of milk and honey are always superadded.

Apropos of this treatment, we take the liberty of telling a little anecdote: Some forty years ago, a travelling preacher in England was taken sick with colic, in the house of a kind old lady, where he was spending the night. The good lady brought a bullet, which, after warming, she induced him to swallow. He was soon relieved from pain, and then began to reflect on the course of the bullet, and at last suggested to his nurse a doubt whether a body so heavy could find its way through the intestinal labyrinth, fearing that it would lodge there permanently. "You need not be the least afraid," said the lady, cheerily, "for that very bullet has gone through me at least twenty times!"—*Pacific Med. and Surg. Journal*.

Surgery.

Subcutaneous Division of the Thigh-bone.—Subcutaneous surgical practice has made a remarkable advance during the present month. In the latter part of November a man was admitted into the Great Northern Hospital, under the care of Mr. William Adams, with ankylosis of the hip-joint, the result of a rheumatic fever suffered seven years ago. The limb of the patient being so deformed as to be utterly useless, Mr. Adams determined to make a subcutaneous division of the neck of the thigh-bone, within the capsular ligament. He performed the operation on the 1st of December, piercing to the bone with a long small knife, and dividing the bone itself with a fine saw. The leg was brought, immediately after the division of the neck of the bone, into a straight position, and fixed into a long splint, and the case has progressed with not one bad symptom, and the wound has closed without any inflammatory action or suppuration. The splint has been removed, and the man can move the thigh to a limited extent. Whether motion of the limb can be preserved remains to be proved, and, if it cannot, the limb will be transferred from a useless to a useful condition; but the great value of the case is that it establishes as a fact the possibility of performing so important an operation subcutaneously, and without an untoward symptom as a result. The operation will be a mark, in the year now nearly over, of the triumph of subcutaneous surgery.—*Lancet*, December 8, 1869.

A new Mode of Treating Old-standing Luxations of the Humerus Forwards.—Professor Heine, of Innsbruck, after referring to the different modes of reduction that have been adopted, recommends the following plan: The patient is to be placed on his back on a bed that is not too low, and in a nearly horizontal position, the upper border of the shoulder projecting a little beyond the edge of the mattress, and the head being supported by the hands. The operator now, with the aid of two assistants, fixes the external border of the scapula of the affected side by a long towel, placed transversely across the chest, with another running over the affected shoulder, and brought obliquely over the chest and back. He then stands on the side of the dislocation, seizes the arm, which is bent at right angles, at the elbow joint, so that, if it be that of the right side, he grasps the wrist with his right hand, and the upper arm just above the elbow with the left, elevates it slowly in a forward direction until the fore-arm comes to lie obliquely over the vertex of the cranium, and the upper arm is in the longitudinal axis of the body, and parallel to the head. The elevation is still continued till the elbow of the luxated arm is brought behind the plane of the occiput, so that the dislocated upper arm and the dorsum of the patient form an angle open behind, though very obtuse. The operator now allows the head of the patient, which has up to the present time been in the same plane with the shoulders, to sink to some extent, and describes with the still firmly held dislocated arm a wide arc in front of the face, toward the healthy side, and back again over the chest, until it is quite depressed, and with a slight rotation of the arm outward the elbow is brought to the side of the thorax. During the performance of this last movement, another assistant must, at the bidding of the operator, introduce his two thumbs at the proper moment, and press the head of the humerus outward into the glenoid cavity. The essential feature of these movements consists in a hyper-elevation of the arm with subsequent circumduction of the rectangularly bent arm.—*Wiener Medizinischen Wochenschrift*, Nov. 25.

Extraction of a Pin from the Urethra.—M. Ticier reports a case in which a boy, aged seven, introduced, at the instance of a school-fellow, a pin into his urethra. It slipped from his hand, and, as usual, retreated along the passage. On examination on the following day, the mucous membrane of the meatus was red and swollen; the penis and perinæum were slightly enlarged. No pain was experienced whilst the child was lying on his back. If, however, he moved about, or endeavored to micturate, he felt an acute pain in the perinæum. The bladder was consequently filled, and was beginning to be troublesome. M. Ticier states that he at first felt some embarrassment as to the mode of procedure to be adopted, but having read some time previously of a similar case recorded by Dr. Boinet, he put the same manœuvres in form. The fore-finger of the right hand was introduced into the rectum, to constitute a *point d'appui*, and to enable him to discover the situation of the pin, which could not be felt through the perinæum. He was only able to feel the point in front of the scrotum. Pressing strongly with his fore-finger against the anterior wall of the rectum, and with his thumb on the perinæum, he made the point press against the inferior wall of the urethra. On raising the penis briskly with the finger and thumb of the left hand, the point perforated the walls of the canal. It was seized with forceps and drawn out for three-fourths of its length. The point was then directed towards the anus, and by pressing back the glans the head presented at the meatus, and was easily removed. The child was placed in a warm bath, in which he easily passed water. Cold lotions were then applied to the scrotum, and in a day or two the child was well.—*L'Union Médicale*, No. 68, 1870.

A Lipoma Cured by Hypodermic Injection of a Watery Solution of Iodine.—Twenty-seven and a half grains of the saturated solution were injected; about three grains each time.—*Wiener Med. Presse*.

The Antiseptic System in Surgery.—At a recent meeting of the Medical Society of Berlin, the leading surgeons of that city recorded their experience of the carbolic acid treatment of injuries and wounds. Prof. Bardeleben stated that, in two hundred and forty-two cases then in hospital, the success of this treatment was fully confirmed. Fifty of these were serious cases, and three of them compound fractures, which, but for Lister's method, must have been amputated. He had found very good results and less irritation from the use of sulpho-carbolic acid of zinc, as employed by Mr. Wood, of King's College Hospital. Prof. Langenbeck stated that, although at first he had the greatest distrust of Lister's method, yet two years' experience of it had now so convinced him of its utility, that hardly any operation was now performed in his clinic without the use of carbolic acid. He also had recently two compound fractures of the leg, which, according to still prevailing doctrines, should have been amputated, but had both run a favorable course under the carbolic acid treatment. Prof. Lister, commenting on this discussion in the current number of the *Edinburgh Medical Journal*, observes that the "poisonous action" with which M. Bardeleben has met in one of ten cases, has not occurred at all in his own practice since lac-plaster was substituted for the paste. The local irritation complained of he ascribes to the omission of the use of a "protective" to guard the wound from the direct action of the acid.—*Brit. Med. Jour.*

A Very Remarkable Case is recorded by Dr. Edward Cass, of Dresden, Ohio, in the *Medical and Surgical Reporter*—remarkable in its phenomena, still more remarkable in its treatment, and most remarkable in its sequel. The patient first discovered at about the

age of sixteen "a whitish, watery discharge" escaping from his urethra one day while at work at his trade (shoe-making). This discharge occurring periodically every day, he applied for medical aid, and took to reading medical books himself. All treatment proved futile until, at the age of thirty-two, he came under the care of Dr. Cass, "much emaciated, an indescribable restlessness haunted him, fluid semen discharging once, twice, or three times during sleep." He denied having ever practised masturbation, "never had erections in his life, nor did the ejaculation of semen produce the least sensation approaching orgasm."

The treatment proposed, and agreed to by the patient, was castration, which operation was performed by Dr. Cass on the following day. The day after the operation we are told that "about four o'clock, while in a dreamy state, the muscles went through the motion—as by habit, a small discharge following;" the same thing recurring twenty-four hours afterwards. But the most extraordinary part of the story still remains to be told. A year after his emasculation, the patient announced to his physician that he was "troubled" with vigorous erections and sexual desire (things which he had never experienced before), and that he contemplated matrimony. This intention he actually carried out, and we are informed that he has for now eight years been happily married, though childless.—*Ibid.*

Professor E. Warren employs the following method for the purpose of preventing the retraction of tissue after an amputation of the lower extremities, which sometimes occurs and greatly interferes with the formation of a suitable stump:

"When it becomes apparent that this accident (retraction of tissue) is likely to occur, the following procedure may be attempted with a reasonable hope of success: Cut a long strip of adhesive plaster two inches and a half in width; apply one end upon the inner side of the limb, beginning, if possible, eight inches above the wound; apply the other end upon the other side of the limb in the same manner; make a few turns with a roller wetted or a strip of adhesive plaster, around the limb and over the plaster first applied; to the loop formed by the first strip of adhesive plaster, formed below the amputated surface, attach a small cord; then pass this cord over a small wheel at the foot of the bed, and tie to it a weight sufficiently heavy to bring the soft parts down over the denuded bone. Traction may be kept up in this way for weeks, without inconvenience to the patient, and with the best results."—*Med. Bulletin*, August 1, 1870.

One Dressing after Operation for Fistula in Ano, or Anal Fissure.—In the Baltimore "Medical Journal" for February, 1870, Professor J. J. Chisolm proposes to protect the patient from hemorrhage, and compel the wound to heal by granulation, by the free use of liquid persulphate of iron to the cut surfaces made in the operation of fistula in ano.

For some thirty years I have taught and practiced the following method in the treatment of fissure, as well as fistula in ano, which is less painful and more simple than the one above suggested, and now going the rounds of the journals. After the case is prepared, chiefly by diet, and an opening dose of medicine the day before the operation, the requisite section for either of these affections is made, and the wound plugged with oiled lint or linen. Quietude in the horizontal position is observed for two or three days, when suppuration will have been established, after which the bowels are moved every day, and ablution of the parts interested rigidly enjoined. This is the whole treatment; for the act of defecation and the position of sitting to bathe twice a day, will prevent the wound healing otherwise than from the bottom. It is thus dressed only once, and while the patient is in the anæsthetic state for the operation. Hemorrhage has not been common in my cases, and I have had as many as four at one time, recently in St. Louis.—*Nashville Journal of Med. and Surg.*, Aug., 1870.

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DISEASES OF WOMEN AND CHILDREN.

Effect of Electricity on the Uterine Contractions.—Dr. de Saint Germain has proved conclusively, from his recent experiences, that electricity does not provoke uterine contractions when they have not yet spontaneously appeared, but that it quickens them when the pains have begun, the placenta, as a general rule, being immediately expelled after the birth of the child. This rapid expulsion of the after-birth appears to constitute one of the most important applications of the electric current. Dr. Radford had already used this means to arrest hemorrhages connected with delivery, likewise Dr. Barnès to counteract the effects of uterine inertia.—*N. Y. Med. Journ.*, Sept., 1870.

Pregnancy with Hymen unbroken.—Dr. H. L. Horton, of Morrisania, N. Y., records, *Medical and Surgical Reporter*, an interesting case of this uncommon condition. On attempting to make a vaginal examination—the patient being then in labor—no opening whatever could be detected by the sense of touch. An ocular inspection was then made, and the obstruction presented the appearance of a dense, whitish, fibrous structure, merging into the surrounding tissue, guarding the entrance to the vagina, so gradually, that no distinct line of demarcation could be observed. About the center of the lower half of the obstruction, the patient being upon her back, I detected a small spot of reddish, tenacious mucus, which could not be detached by the cotton, but, upon taking hold of it with a pair of forceps, it was found to connect through a small, round opening, with something inside. A small silver probe, whose bulb point was exactly one-sixteenth of an inch in diameter, could, with a slight degree of force, be passed through the opening, the border of which appeared to be somewhat thicker than the surrounding structure, so that the probe passed with something of an elastic spring. By bending the point of the probe nearly to a right angle and passing it through the opening, I could, by depressing well the outer extremity, observe the bulb move along the inner side of the obstruction, which I now made out to be about the thickness of an ordinary dressed sheepskin. Seeing my way clear, I at once introduced a bistoury, and made a crucial incision, after which I introduced my finger, and very much enlarged the opening by tearing, so as to avoid a hemorrhage, should there be any blood-vessels in the structure. After the escape of a few ounces of dark, ropy-looking fluid, on introducing my finger I could now distinctly feel the bag of waters, which I at once ruptured, after which there could be distinctly made out a vertex presentation, with an L. O. I. position, anterior variety. The labor was completed in seventeen hours from the time that the pains first set in.—*Ibidem*.

Retracted Nipple.—Dr. George H. Lyman, Boston, Mass. (*Boston Med. and Surg. Journal*), at a late meeting of the Boston Obstetrical Society, described the manner in which the child's tongue "strips" the nipple between its tongue and upper jaw, as a milker strips the cow's udder with his fingers. He had observed the operation in the mouth of an infant with hair-lip.

He had also related the case of a woman whose nipple was so poorly developed as to be apparently on a level with the breast. After confinement the breast could not be evacuated; the consequence of which was an excessively troublesome abscess. In her next pregnancy the plan was adopted of breaking off the neck of an ordinary wine-bottle (with smooth lips), and binding it on to the breast in such a man-

ner that the circular rim of glass pressed upon the areola around the base of the nipple. This was done for ten days preceding confinement, and the result was most satisfactory. Not only was a deep circular depression made around the nipple, but the latter became more elevated; and the success of the experiment was established by the ease with which the child, when born, accomplished the act of sucking.

Case of an Extra-Uterine Fœtus Successfully Extracted by the Operation of Lithotomy.

By JOSEPH BOSSUETT,

Member of the Medical Society of Massachusetts.

In the month of October, 1807, Mrs. Coleman, of Braintree, found herself in a state of pregnancy, attended with uncommon distress, and some pungent pains shooting from the hypogastric to the epigastric regions. She continued in that way until the latter part of the ensuing spring, when she had all the symptoms of a true travail. She sent immediately for an accoucheur, who, not being able to come at the child by the natural passage, ordered large doses of opium, with the injunction to repeat them as often as the pains recurred. A fortnight after that the pain abated * * * the time when I suppose the child died in the abdomen. She was for two months afterward very much troubled by a disagreeable sensation, which she called drawing.

The abdomen swelled to a very large size, which after some time gradually subsided. The three succeeding years she passed without much distress, but at the end of that time she began to experience very acute pains, attended with evacuations, by the urethra, of a matter sometimes of a yellow caste, sometimes bloody and of a very foetid smell, and voided in the same time, by the same canal, some very small bones. A communication also took place between the bladder and rectum, so as to let the feces and urine pass either way.

During five years before my first visit to her, she experienced the most excruciating pain night and day. Having been informed of my recent arrival from Martinico, with my family, and that I resided in Hingham, she sent for me the 20th of May, 1816. I visited her the same day, and, after a critical examination, found the child in the bladder (mostly in the bladder and partly in the abdomen), crusted over with a calculous matter. Considering her in a dangerous situation, I advised her to submit to the operation of lithotomy as the only means of relieving her from her sufferings. She readily consented to it, and the operation was performed by me, the 17th of June, 1816, attended by Doctors Noah Fifield, of Weymouth, and Robert Thaxter, of Dorchester, two respectable members of the Medical Society, in whose presence one hundred and forty-six bones of a fœtus, about seven months old, were extracted, together with a stone about the bigness of an olive. She has since entirely recovered, and enjoys at present a perfect state of health, without any pain whatever; but the communication between the bladder and the rectum is not yet wholly obliterated.—*Med. and Surg. Reporter*, Sept. 8d, 1870.

Cesarean Operation—Proposed Modification.—Seeing how often women perish after this operation, from hemorrhage into the peritoneal cavity, or from penetration into the latter of the lochial fluid, M. Tarnier proposes, before incising the uterine walls, to apply seven sutures on each side between the lips of the abdominal wound and the uncut uterine walls. The latter are then to be divided, and the operation to be concluded in the usual way. M. Tarnier, who brought this proposal before the Surgical Society of Paris,

found much opposition. It was shown that the dangers of hemorrhage are not so great as he supposes, and that death is mostly due to inflammation of the peritoneum unconnected with effusion of fluid.—*London Lancet*.

Mammary Abscess.—Dr. Stewart, Ill., treats mammary abscess as follows:

"As soon as its probable location is discovered, apply to it the compound iodine ointment of the U. S. Dispensatory, with the addition of forty (40) grs. of powdered camphor to each oz.; spread this ointment on a cloth and apply over the indurated portion of the breast, and cover with another cloth, well saturated with tincture of camphor. The ointment should not be strong enough at first to affect the cuticle, which in some ladies is very sensitive; continue to nurse that breast, and re-apply the dressings as fast as they get dry. There is generally a chill, followed by considerable fever, which should be promptly checked. For this purpose I have found gelseminin reliable in 1-16 to 1-8 gr. granule every hour until it produces its effects; and where the symptoms demand it, the same quantity of alcoholic ext. of aconite. In combination gelseminin relieves the early symptoms of any fever peculiar to the puerperal state. It controls the secretion of milk, equalizes the circulation, and prevents local inflammation. The treatment of mammary abscess must be such as will soonest result in a discharge of the pus. Warm poultices and the knife will do this, but will not always cure the case. The incision may close too soon, or may not be at the right place to allow all the matter to escape; frequently the whole gland becomes involved, and one abscess after another occurs, apparently without a remedy. In these cases iodine will be found useful in preventing a second abscess. The whole gland should be enveloped in iodine ointment, except immediately over the part undergoing suppuration. To that portion the poultice should be limited until the abscess is ready for the knife. The iodine relieves the painful tension by cutting off the supply of milk, and the material from which to make a future abscess; thus, by restricting the amount of suppuration, and affording escape at the proper time and place, we save much suffering, and secure the breast for future use. Diet carefully; keep the pulse down, the bowels open; apply the ointment freely; keep the nipple from getting sore, and the excision from closing too soon. (*Med. and Surg. Reporter*, April 2, 1870.—*Ind. Jour. of Med.*, Aug., 1870.

Epispadias in the Female.—At the meeting of the Medical Society of Vienna, May 6, 1870, Dr. Funk showed the drawing of a case of this kind. The clitoris was absent, and in its place was a groove opening into the urethra, the latter easily admitting the little finger. On either side of this groove were the halves of the fissured clitoris. This girl, seventeen years old, menstruates regularly, but cannot hold her urine long, the latter escaping when she is dancing. This is the simplest kind of abdominal non-union in the mesial line, and presents an arrest of development at a late embryonic stage. It should be remembered that marsupial animals have a double clitoris, and that the same formation exists in cats and dogs, but is only marked by a groove. (*Lancet*, from *Med. Central. Zeit.*—*Boston Med. and Surg. Jour.*, Aug. 4, 1870.

Dr. W. W. Slaughter, of Newburgh, Ind., reports the following interesting case of imperforate hymen: "Miss M. S., aged 17 years, sanguine temperament, had suffered greatly during her menstrual periods with acute pain in the pelvis and loins, which grew less tolerable at every recurrence. I was called to see her on the 9th inst. Upon examination found a smooth fluctuating tumor projecting slightly between

the external labiæ, which I conjectured to be an imperforate hymen, and endeavored to break with my finger; failing in which, I next tried the point of a silver catheter, but the resistance was such that I did not succeed; I then opened it with a bistoury—after first evacuating the bladder, which was considerably distended—when there was immediately discharged, as near as I could judge, about three pints of non-coagulable blood or menstrual fluid, having a cadaverous, sickening odor. The relief was instantaneous and complete.

"The remarkable feature in this case is that the patient had, without any vicarious discharge, retained a tolerable degree of health, and performed labor regularly between her menstrual periods for the two years previous, always, of course, suffering severely for a few days during the menstrual epoch. The patient is now in perfect health.—*Ind. Jour. of Med., Aug., 1870.*

Dr. A. Scheterlich reports twenty-five cases of ovariectomy (three double ovariectomies), performed by Prof. Köberlé, of Strasburg. Of these eight cases were without adhesions, all successful; ten cases with slight adhesions, all successful; seven with extensive adhesions, two successful, or 6.8 per cent. On the whole 80 per cent. were cured. Of the patients, six were from 48 to 65 years old, one of which has since died. In one of the fatal cases a suppuration of the inner wall of the cyst, in consequence of previous punctures, was found to exist. The three cases of double ovariectomy recovered.—*Centralblatt. f. d. Med. Wiss., No. 22, 1869.*

Removal of the Entire Uterus.—At the meeting of the Académie de Médecine, December 7th, M. Péan presented a patient who excited great interest on account of the nature of the operation she had undergone. Indeed, M. Péan, one of Nélaton's most distinguished pupils, has already established a high reputation as a famous operator. First coming forward to establish, what had long been denied, the possibility of performing ovariectomy with success in Paris, he next introduced a patient to the Academy whose spleen he had removed, and now exhibits another, not only as an example of success in a complicated case of ovariectomy, but of the far more remarkable fact of having undergone the removal of the entire uterus and its appendages. The case was, indeed, a complicated one, for there was a very large cyst of the left ovary, the uterus was greatly hypertrophied, mounting up above the umbilicus and containing a cyst, while a fibrous tumor occupied the right ovary, and a cyst the right tube. The existence of a movable fibrous tumor, independent of the cyst and of hypertrophy of the uterus, was recognized prior to the operation; but in what proportions these lesions existed could not be ascertained, by reason of the adhesions which united the various tumors to each other. Having exposed the ovarian cyst by a long incision, M. Péan commenced, as is his custom, its removal piecemeal (*morcelant*), employing his long cauterizing irons heated to whiteness. Having in this way removed a notable portion of the cyst, he came upon the uterus, enormous in size, soft, fluctuating, and adherent on every side. The adhesions were very vascular, and any rupture of these gave rise to hæmorrhage, which had to be arrested by heated irons. The only thing that seemed feasible was the removal of the diseased uterus at the same time with the other tumors. M. Péan would not cut through the cervix, as this was excessively hypertrophied, equalling a fist in size, but carried his incision through the vagina. He next passed a double thread by the abdominal wound through the vagina from before backward, by means of which he practised two

ligatures. That on the left side comprised the great ovarian cyst, and the other embraced all the portion of the vagina corresponding to the uterus, together with the right ovary and tube. An incision was made just above the ligatures, and the parts comprised were removed by a considerable amount of traction, the double pedicle thus formed being brought in contact with the abdominal parietes. This portion of the wound was not united, three caoutchouc tubes being inserted. The adhesions were too intimate to allow of the separation of the fundus of the cyst from the wall of the lesser pelvis. It was left *in situ*, but was spontaneously discharged on the thirtieth day, by which time solid adhesions had closed up the vaginal incision, without leaving any perforation where the ligatures had been. The recovery was complete, and when the patient was presented the operation had been performed three months.—*N. Y. Med. Journ., Sept., 1870.*

Treatment of Uterine Catarrh by the application of Carbolic Acid.—Dr. W. Playfair observes that in a large proportion of old-standing cases of uterine catarrh it is hopeless to expect a permanent cure by any means which do not act directly on the seat of the disease, which is the lining membrane of the cavity of the uterus and cervical canal beyond the external os, accompanied, of course, with secondary morbid states of the body, of the uterus and cervix, such as hypertrophy, congestion, &c. Rest, applications to the exterior of the cervix, and general treatment, will unquestionably cause a temporary improvement; but on a recurrence to the old habits of life all the original symptoms return. There are serious objections to intrauterine injections, unless the os is first dilated with laminaria tents, as they are apt to bring on severe uterine colic. By means of fine probes of whalebone or flexible metal, round which a thin film of fine cotton-wool is wrapped, alterative applications can readily be made to the interior of the uterus without pain or danger. Dr. Playfair states that in the very numerous cases in which this plan of treatment has been carried out, in no single instance has anything but the greatest benefit accrued. It is no doubt advisable to select the cases judiciously, and where there is much uterine tenderness, intrauterine treatment should be postponed until this has been diminished by rest, leeching, &c.; but with proper precautions the treatment is perfectly safe. A concentrated solution of carbolic acid, eighty parts to twenty of water, is used; and it acts so well that for a long time nothing else has been employed. After the first application the discharge is sometimes increased, but after the second or third it is generally greatly diminished, and a single application is often sufficient to cure superficial erosions of the cervix. As a rule there is no difficulty in passing the probes, as in true uterine catarrh the os is invariably patulous. As the case improves the patulous state of the os diminishes, and this is found to be one of the most certain signs of improvement. Dr. Playfair appends the history of several successful cases. (See *Lancet*, July 2, 1870.—*Practitioner*, Aug., 1870.)

Syphilis and Dermatology.

Case of Infantile Syphilis in one of Twins. By H. E. Cauty, Surgeon to the Liverpool Dispensary for Skin Diseases.—Margaret L. came on the 26th February, 1868, to the dispensary with a child, whose father is a shoemaker. She has had four dead-born children, and has been on treatment for secondary symptoms, though there are none at present visible. The child is one of twins, the other having no eruption or any signs of disease; they are both squalid, evidently

badly nourished, and are at present ten weeks old. The child is one mass of scaly venereal eruption, the eyes and nose being especially bad. Owing to the nostrils being stopped up, it has great difficulty in taking the breast. It has been treated for some weeks at the Homœopathic Dispensary. The prognosis was very unfavorable.

There not being any part of the body as large as half-a-crown in any one spot free from scales or inflammation, where the lamina had peeled off, she was directed to anoint the whole body with an ointment of one-seventh of ung. hydrarg. fort. and ung. cetacei, and to give the child one-sixty-fourth of a grain of hydrarg. bichlorid. in 3 i. syrup sarsæ three times a day; also to wean it. On March 1st, the feet being better, gr. x. of ung. hydrarg. fort. was rubbed in every night, and glycerine applied to the flexions of the joints. March 4th—Eruption much better, but covered with varicella. 6th—Face quite clear; vesicular eruption subsiding. April 25th—Child quite free from any visible disease, and better altogether.

July 15th—The child was brought again; the mother, being starving, has had to suckle again. She herself has now ulceration of the throat, and white deposit on fauces. The child has psoriasis syphilitica and sores on the vulvæ, much diarrhoea, and flatulency. They attended some few times, getting gradually better, and then disappeared.

The points of interest in this case are—firstly, the rapidity of recovery from an amazing amount of unchecked disease, and the immunity of the other twin up to the last inspection in the middle of August from the poison the child and the mother suffered from. It also appears difficult to limit to what extent the use of mercury can be carried, not only with safety, but with advantage.—*Boston Med. and Surg. Jour., Sept. 22, 1870.*

Sulphuric Ether in Epididymitis.—A. Assadorian, M.D., Resident Surgeon to Charity Hospital, New York, reports that he has seen several cases of acute epididymitis relieved in two or three days by the application of sulphuric ether to the inflamed organ. His plan is to elevate the bedclothes by a basket-work or hoop, so as to favor free evaporation. The testicles being elevated by oakum, a piece of lint is wet with the ether and laid over the inflamed testicle and cord, and kept constantly wet. It is necessary to direct the patient to make the application regularly, as the cure is retarded if the application is not continuous. The usual quantity of ether required is about three bottles of Squibb's ether fortior.—*Amer. Jour. of Syphilis and Dermat.*

Quicksilver Suppositories in Constitutional Syphilis.—The following simple mode of treatment, if supported by experience, recommended by M. Lebert, will probably be largely employed. Proceeding on the known fact that, next to subcutaneous injection, the best method of effecting absorption is by the mucous membrane of the rectum, M. Lebert has experimented largely with various medicines, and amongst others with mercury introduced in the form of a suppository. He employs cacao butter as the menstruum, or if it be desired to make the mass of firmer consistence he adds wax, and the unguentum hydrargyri is then rubbed up with it in small and appropriate doses. If any burning pain is experienced, it may be removed by the addition of a little morphia. The suppository is usually introduced at night, and allowed to remain for some hours, or till morning. In three or four days the cure is completed, with the employment of from twenty-five to thirty suppositories. The mouth was not in any instance affected. (*Wiener Medizin. Wochens.*, No. 27, 1870.)

Confluent Small-Pox Treated by Carbolic Acid.—*M. Chaffard* recently made the following communication to the *Société médicale des hôpitaux*:

"The treatment of which I have to speak consists in the use of the crystallized carbolic acid in large doses, a therapeutic means which has shown to me its efficacy in the secondary fever of severe confluent small-pox, that secondary period to which, as we know, the greatest number of those suffering from that disease succumb.

"To judge more manifestly of the efficacy of this remedy, I have applied it exclusively to five cases of decided severity, and to my very great surprise I have seen the violent febrile phenomena and the accidents of suppuration abate rapidly in all these cases which seemed absolutely beyond the resources of art. A single one of these five patients succumbed, but only after he had regained appetite and been out of bed for a fortnight; he died suddenly, and the carefully performed autopsy did not reveal any thing but a certain degree of pulmonary congestion, an affection of which the patient had shown signs, however, previously.

"The idea of this medication had been suggested to me by the essay of *M. Sanson*, on the happy effects of the use of carbolic acid in large doses in the treatment of mountain sickness (*mal de montagne*). The dose I employed was 1 gramme of cryst. carbolic acid in a draught of 125 to 150 grammes, and I have continued it for eight or ten days without any toxic accident, without any indication of gastric or intestinal intolerance, without any complaints even in regard to the taste of the draught. The medication is completed by external lotions with carbolized water of 1 or 2 per cent. The dose of carbolic acid employed internally should be lowered in the case of women and children, according to the usual rules of posology.—*Abeille Médicale*, Paris, May 15.

Dr. Gross, of Weir, recommends the following treatment in small-pox: The patient is placed in a tepid bath, and washed thoroughly with potash soap. If too weak for this, he is washed well with the soap in his bed. He is then dried carefully and placed in a clean, dry bed. A mask of linen, with apertures for the nose, mouth, and eyes, is soaked in a solution of glycerine (1 part of glycerine to 2 parts of water), and placed over his face, while the body is also covered with similarly prepared pieces of linen. If there is great heat, cold water is applied above the glycerine applications. In addition to this the patient is, after the bath, placed under the cold douche, before the glycerine is applied, unless contraindicated by other diseases. If the skin of the soles of the foot and hand is very much thickened they are bathed in weak solutions of potash.

Dr. G., after having treated 98 patients in this manner, claims the following results:

1. Every symptom caused by the tension and hyperæmia of the skin, as itching, burning, etc., disappears in a short time (12--24 hours).
2. By removing the pressure on the nerves of the skin the excitement of the patient ceases; and, if no complications exist, the appetite improves and sleep returns, so that, even in fatal cases, the patients feel relatively comfortable.
3. The pitting is but slight.
4. The pulse is reduced—the temperature remains constant.
5. The danger of infection is lessened.
6. The average duration is shorter under this than under any other treatment.—*Pesterr. Zeitscher. f. pract. Heilkunde*, December 24, 1870.

Miscellaneous and Personal.

By a mysterious dispensation of Providence, which we do not pretend to fathom, quackery in medicine finds its firmest allies in the professedly religious press. It may be that the zealous guardians of souls are so exclusively solicitous to get their readers, without unnecessary delay, into a better world, that they are glad to advocate any likely means of escaping from this life; or, perhaps they retain a lingering longing for the traditions of the dark ages, when phlebotomy and purgation were sacerdotal functions. But certain it is that the popular taste for amateur narcotism, catharsis or other modes of poisoning, is more mischievously fostered by religious papers and certificates from members of the clergy than by any other agencies. In a peculiarly pious journal, now lying before us, we find advertisements, first, of an effectual cure for "piles," which a venerable charlatan, who refers for a character to the editors, has patented, and which he offers to forward to the afflicted for the modest sum of \$10. Next is a "cure for consumption"; then two poisonous hair dyes, official analyses of which have been published widely, and probably seen by the editors; then patent pills for the rapid cure of a score or more of diverse maladies; next, sandwiched between "Gospel Tracts" and "communion services," a narcotic preparation for the dangerous drugging of infants; and, finally, a "catarrh specific" invented by a "reverend brother," whose attention was turned in this direction by his own ill health, and who boasts that his nostrum "will arrest the decay of the bones of the nose." A certificate is appended from another reverend gentleman, who "hopes that God will bless" the advertiser's "effort to relieve the afflicted of our race" (by keeping secret for his own gain a remedy which he asserts to be of use to all mankind?); and in another part of the paper is an "unreserved" puff of the said specific, coupled with the somewhat irrelevant testimony that its reverend proprietor "has served the Lord faithfully."

Is it possible that the conductors of journals representing one of the "learned professions" really believe in the efficacy of quack nostrums vaunted in their columns? Do they not know that the pretense of curing unseen patients by mysteriously discovered specifics, unknown to scientific botanists or chemists, is attributable either to gross ignorance or to gross imposture? The individual imbecile who—getting well of some self-limiting ailment while taking catnip-tea, or some other "old woman's remedy"—fancies that he has discovered a panacea, is pardonable, if ridiculous, until he undertakes to make pecuniary profit out of his fellow imbeciles; but the journalists who aid his greed at the expense of human health are utterly inexcusable.—*Med. Gazette*, Aug. 27, 1870.

A self-sufficient humbug who took up the business of physician and pretended to a deep knowledge of the healing art, was once called upon to visit a young man afflicted with apoplexy. Bolus gazed long and hard, felt his pulse and pocket, looked at his tongue and his wife, and finally gave vent to the following sublime opinion:

"I think he's a gone fellow."

"No, no!" exclaimed the sorrowing wife, "do not say that."

"Yes," returned Bolus, lifting up his hat and eyes heavenward at the same time, "yes, I do say: there ain't any hope, not the leastest mite—he's got an attack of nihil fit in his lost frontis—"

"Where?" cried the startled wife.

"In his lost frontis, and can't be cured without some trouble and a great deal of pains. You see his

whole planetary system is deranged; firstly, his vox populy is pressin' on his advalorem; secondly, his cutacarpial cutaneous has swelled considerably if not more; thirdly, and lastly, his solar ribs are in a concussed state and he ain't got any money, consequently he's bound to die."

A Contributor to a homœopathic publication (*American Observer*, June, 1870) narrates naively how in a case of intermittent fever, "the homœopathic physician gave the patient twenty grains of quinine in repeated doses and arrested the disease. After having done so, he gave one dose of the two-hundredth potency of china and declared it was that which cured the disease." The moral drawn is, not that twenty grains of quinine approximate somewhat to the ruinous dosing of the detestable "allopathic" school, but that "genuine homœopathic practice considers primarily the laws of cure, and only such things as have true relations to health and disease."—*Med. Gaz.*, July 23, 1870.

A rascal sends out the following circular under the heading "Collegiate Agency":

"This Agency has been established for the purpose of giving such information as is generally necessary before entering upon a Collegiate Course of Study, or taking any of the learned Degrees."

"Books, Medicines, Instruments, &c., will also be sent C. O. D., at market rates, upon receipt of orders."

"Physician's Practices sold on accommodating terms."

"Through the recommendation of this Agency, Physicians, Lawyers, Clergymen and Teachers can obtain the Honors of all the Universities in the United States, such as the degree of A. M., A. B., M. D., S. D. D., D. D., LL. D., &c. For additional particulars, address A. J. HALE, M. D., 214 Jacoby Street, Philadelphia."

Deliriums Tremendous.—A negro was brought up before the mayor of Philadelphia a short time since, for stealing chickens. "Well, Toby," said his honor, "what have you got to say for yourself?" "Nuffin but dis, boss: I was as crazy as a bed bug when I stole dat 'ar pullet, coz I might have stole de big rooster, and never done it. Dat shows 'clusively to my mind that I was laboring under the delirium tremendous."

In 1521 a Physician by the name of *Voythes* was accused of witchcraft and burned at the stake, because he succeeded in safely delivering a woman, after she was given up by a midwife.

An Itemized Bill.—A good anecdote is told of the famous French surgeon Nélaton. Going through one of the streets of Paris one day, he came upon a crowd standing in front of a drug store. There a man lay stretched out who had been terribly wounded by a sharp buggy shaft. His belly had been ripped and a large part of his intestines protruded. His life could be saved only by a very difficult and dangerous operation, but Nélaton was equal to the occasion, and soon his patient, quite a wealthy man, was sent home out of danger. For three weeks Nélaton heard nothing more of him, but then he made his appearance and asked his preserver how much he owed him. "Hundred and fifty francs," replied the surgeon. "That is much," said the man, "but give me a specified bill; here is your money." Nélaton sat down and wrote as follows: "For re-adjusting a yard and a half of the intestine canal, at a hundred francs per yard, one hundred and fifty francs."

A patent-medicine vender in one of our principal cities was dilating to a large crowd upon the won-

derful efficiency of his Iron Bitters, pronouncing them the great panacea, and all potent in building up an "iron constitution."

"That is so—that is so," said a bystander. "What he tells you is a fact, gentlemen, every word of it."

"Hear that, will you," said the delighted quack; "here is a living testimony right before your own eyes—a man who has used the bitters and can recommend them."

"No, not exactly that," replied the fellow; "I have never used the stuff myself, but you see Steve Jenkins did, and they just saved his life."

"How's that?" asked some one.

"Well, you see, Steve had taken the bitters one week before he was shoved in prison for murder. He was stripped of everything in the shape of iron about him, and yet he made a bar and worked himself out."

"He probably had whiskey enough in him to furnish a bar," suggested a wag.

"No, but he didn't," retorted the first. "He had been taking this man's bitters, d'ye mind, and what does Steve do but open a vein in his arm and took iron enough out of his blood to make a crowbar, and pryed the gates open with it and let himself out. Fact!"

The medicine man subsided.

In *Queen Anne's reign* no physician, with the slightest pretensions to practice, could manage without his chariot and four, sometimes even six horses.

A *Court in Michigan* has decided that a physician is not warrantor or insurer of a case, and he is not to be tried by the result of his remedies. His only contract and duty is to treat the case with reasonable diligence and skill.

An *English Life Insurance Company* has just paid the insurance of a man who took out his policy in 1799 and died recently at the age of one hundred and three—the first instance in which insurance has been paid on the life of a centenarian.

A *country doctor* is so penurious that when he goes to make a visit in the country he takes a hen in his gig to eat up the oats his horse scatters while eating. The hen knows her business so well that she gets right out and goes to work without being told.

Abernethy's Dislike to Unnecessary Talk.—People who came to consult this eccentric man took care not to offend him by bootless prating. A lady on one occasion entered his consulting room and put before him an injured finger, without saying a word. In silence Abernethy dressed the wound, when instantly and silently the lady put the usual fee on the table and retired. In a few days she called again and offered her finger for inspection. "Better?" asked the surgeon. "Better," answered the lady, speaking to him for the first time. Not another word followed during the rest of the interview. Three or four similar visits were made, at the last of which the patient held out her finger free from bandages and perfectly healed. "Well?" was Abernethy's monosyllabic inquiry. "Well," was the lady's equally brief answer. "Upon my soul, madam," exclaimed the delighted surgeon, "you are the most rational woman I ever met with."—*Jefferson's Book About Doctors.*

Pharmaceutical Etiquette.—It is a simple thing enough to go to a drug store and buy ten cents' worth of syrup ipecac, but how differently it can be done in different countries. A friend just returned from Europe, describes the scene thus in Paris:

Enters customer; takes off his hat, making a low bow: "Good morning, sir."

Druggist, returning the bow: "Good morning, sir. How do you do?"

C. "Very well, thank you. You have syrup ipecac, have you not?"

D. "We have; how much do you wish to have of it?"

C. "Give me ten cents worth, if you please."

D. "Yes, sir; please sit down."

Druggist puts up the bottle, caps and seals it, hands it to the customer and says: "Thank you," when he receives the money. Customer says "Thank you," when he gets the bottle; then another bow from each party, and exit customer.

Compare this with the Republican simplicity of New York:

Enters customer, whistling softly "Shoo Fly!" walks up to the counter—"Ipecac?"

Druggist, folding the paper he was reading, nods and grunts:

"Hem! how much?"

C. "Ten cents."

Druggist hands the bottle, customer pays and walks out.

N. B.—The Frenchman's syrup ipecac is no better than the New York article.

Forty-two surgeons have sailed from this port to Europe to join the German army, two of them last Saturday. Their fares, with two exceptions, were defrayed by the German Patriotic Aid Society of this city. Their names are: Aug. Henry Achenbach, Chas. Bennesscheidt, Francis Cambosy (formerly at the Charity Hospital, at his own expense), Philip Feldbausch (had gone from this city to Europe and joined the Prussian army as surgeon in the Prussian-Austrian war of 1866), Edward Grether, F. R. Knoche, F. C. Rau, Henry Woodville, of this city; Richard S. Dewey, James Elliot Graham, of Brooklyn; Gustavus Stamm, Westchester County; Horace Tracy, Albany, at his own expense; Matthias Cook, Utica; Chas. Proegher, Albion; Edward Woodbury Avery, Clinton, Oneida Co.; W. B. Trull, Boston, Mass.; Leopold Spier, Charles Oswald Stockmann, New Haven; F. Halves, Trenton; Randolph S. Hittel, Philadelphia; J. W. Dittmann, C. A. Rahter, Harrisburg; S. C. Ermentrout, J. M. Hoffmann, W. J. Hoffmann, Reading, Penn.; Manno W. Van Kunkel, Allentown, Penn.; H. F. C. Krumme, Ridgeway, Penn.; Carroll V. Frush, J. J. Reuss, A. Trego Shertzer, Baltimore; Otto Frankenberg, Columbus, Ohio; Otto Krakow, Julius Hilgard Tynedale, St. Louis; George W. Goodner, Chicago; Erwin Hense, Milwaukee; B. F. Kierulff, Marshalltown, Iowa; Paul Bohrdt, Hamilton, Canada; Aug. Wilhelm Diederichs, of the German steamer Weser; Friedrich Mueller, of the German steamer Hanover; Ludwig Severin, of the German steamer Frankfort; Friedrich H. Vogel, of the German steamer Hermann; Joseph Gleutsmann, of the German steamer Leipzig, now in port at Baltimore, Md.

Dr. John Sloan, of New Albany, Ind., has been tendered the Professorship of Surgery in the Louisville Medical College.

Prof. A. B. Crosby, M. D., has been appointed Professor of Surgery in the Long Island Medical College, vice Prof. Frank H. Hamilton, resigned. Prof. Crosby already holds the same chair in the Medical Department of the Universities of Vermont (Burlington, Vt.) and Michigan (Ann Arbor, Michigan). Prof. Hamilton has held this chair at Brooklyn since the organization of the college. Prof. Crosby, we learn, will hereafter make Brooklyn his permanent residence.

Prof. W. T. Lusk, of Long Island College, has

been appointed to deliver the course of lectures on Physiology, in the Massachusetts Medical College (Medical Department Harvard University), during the ensuing winter. The compliment thus paid by this venerable institution to Prof. Lusk is as handsome as it is well merited.

F. S. Bartlett, M. D., of Chicago, has been appointed Professor of Inorganic and Analytical Chemistry, and H. P. Merriman, M. D., of the same city, Professor of Organic Chemistry and Toxicology in the Chicago Medical College. These two chairs have been held by Prof. E. G. Wheeler, who has resigned. A new chair of Ophthalmology and Otology has been created and filled by the appointment of S. J. Jones, M. D., of Chicago.

Dr. F. J. LeMoyné has made a donation of \$10,000 for the establishment of a town library, to be placed in the Town Hall at Washington, Pennsylvania.

Dr. Wm. Marsden, of Quebec, has been elected an honorary member of the Gynecological Society of Boston, Mass., and a Corresponding Fellow of the Obstetrical Society of Edinburgh.

Dr. Parkes, of London, has been experimenting with the effects of brandy upon a "healthy soldier." He makes out a terrible record of the acceleration of the action of the heart, but the soldier rather liked it.

Dr. Steindachner, Curator of the ichthyological department of the Vienna Museum, has been permitted by the Government to go for two years to the United States. He was invited by Prof. Agassiz to help in the naming and arrangement of the vast collection of fish made in the Amazons.

Prof. Hemholtz has left Heidelberg for Berlin, to occupy the position left vacant by the death of Magnus, but with the title of Professor of Physiology.

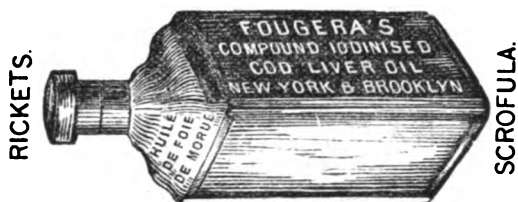
Dr. Alexander Simpson, nephew of the late Sir James Y. Simpson, has been elected to the Chair of Midwifery in the University of Edinburgh.

Books, Pamphlets and Journals Received.

- The Raising and Education of Abandoned Children in Europe, with Statistical and General Remarks on that subject. By A. Jacobi, M. D., etc.
- A Descriptive Catalogue of the new Sydenham Society's Atlas of Portraits of Diseases of the Skin. Part I. London.
- Physician's Visiting List. Lindsey & Blakiston. Philadelphia. 1870.
- Catalogue of Works on Medicine, Surgery, Dentistry, and the Collateral Sciences. Published by Lindsey & Blakiston. Philadelphia.
- Ueber die beweglichen Gelenkkörper. Thesis by Emil J. F. E. Harder of the University of Kiel, North Germany. 1869.
- Medical Progress. By A. N. Bell, M. D.
- Proceedings of the Texas State Med. Ass. 1870.
- N. Y. Medical Journal.
- Medical Gazette.
- Boston Medical and Surgical Journal.
- Buffalo Medical and Surgical Journal.
- Medical and Surgical Reporter.
- Ind. Journal of Medicine.
- Medical Bulletin.
- Journal of the Gynecol. Society, Boston.
- Dental Cosmos.
- American Eclectic Review.
- American Practitioner.
- Nashville Journal of Medicine and Surgery.
- New England Medical Gazette.
- Chicago Medical Times.
- Cincinnati Lancet and Observer.
- The Practitioner.
- Detroit Review of Medicine and Pharmacy.
- Annual Report of the Children's Friend Society.
- Michigan University Medical Journal.
- Canada Lancet.
- Good Health. A Journal of Physical and Mental Culture.
- Physician's Monitor.
- American Journal of Pharmacy.
- Cincinnati Medical Repository.
- Loomis' Musical Journal.
- Oregon Medical and Surgical Reporter.

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This preparation is used with advantage in all cases of Cough, resulting from the respiratory organs, as also in Whooping Cough, Inflammation of the Throat, Chronic Bronchitis, Influenza, &c. To the consumptive even it is of great benefit in producing sleep, by soothing the irritation of the bronchial tubes, and in relieving the cough by stimulating the purulent expectoration of the diseased lungs.

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Diuretic, Tonic, Stimulant, Emmenagogue, and a powerful Regenerator of the Blood,

is a most invaluable remedy for all constitutional disorders due to the impurity and poverty of the blood.

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are becoming very popular. Properly used, they alleviate promptly the distressing symptoms when similar remedies have failed. They are highly spoken of in *Dorvault's Officine*, 1897, page 374: "Owing to a new process, used by Mr. LANCELOT, to prepare his Asthmatic Cigarettes, they appear to be more active than any other."

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This preparation represents the tonic properties of the best Peruvian Bark, with which are combined the nourishing qualities of fresh beef. It will be found very useful in cases of debility, dyspepsia, loss of appetite, languor consequent upon protracted sickness or excessive work.

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Containing all the remedial properties of Peruvian bark combined with the nourishing qualities of fresh beef, and the tonic effects of Pyrophosphate of Iron. It is recommended in all cases of general debility and nervous prostration, in which the use of iron is indicated.

FOUGERA'S NUTRITIVE SYRUP OF IRON.

This preparation unites with the strengthening properties of the Pyrophosphate of iron the nourishing qualities of fresh beef. It is readily assimilated, and will be found a most useful remedy in female disorders and all diseases of adults and children arising from the deterioration of the blood. It has no unpleasant taste whatever, and does not affect the teeth.

FOUGERA'S NUTRITIVE JELLY.

To the invalid and sick this pleasant combination will be very welcome. It is grateful to the taste, is readily borne by the stomach, and its happy tonic effects are soon felt. Every tablespoonful contains the soluble constituents of 1 oz. of choice beef.

FOUGERA'S NUTRITIVE FOOD.

This preparation will be found a most nourishing and readily assimilated food for infants, invalids, or convalescents. It contains in addition to the soluble constituents of beef, all the natural elements which experience has proved useful in building up the system.

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This extract is a pure Extract of Beef, unsurpassed in quality, free from fat and gelatine, each pound of which contains the soluble nutritive constituents of 34 to 36 pounds of the finest beef, exclusive of bones and fat, corresponding to about 45 pounds of good butcher's meat. As a medicinal agent it will be found of great value to the Sick Invalid, and persons and children of Weak Constitutions, but its most extensive use is for domestic purposes.

It will keep unaltered for years in any climate, and will recommend itself at once for its purity, its permanency, and cheapness. Physicians, by ordering Liebig's Extract of Meat of La Plata, may rest assured of having the purest Extract of Meat that can be prepared.

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A prompt and reliable ready-spread Vesicant Tissue, most convenient for Druggists and Country Physicians, and far preferable to the ordinary Emplastrum Cantharidis.

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FOOD FOR INFANTS AND INVALIDS.

We respectfully invite the attention of Medical Practitioners and others to the Farinaceous article of food known as Dr. RIDGE'S PATENT (cooked) FOOD FOR INFANTS AND INVALIDS, a preparation which was introduced into England ten years ago by the patentee, JOHN JAMES RIDGE, Esq., M. D., F. R. A. S., M. R. C. S., &c., &c., a gentleman of thirty-five years successful London practice, with a view to supply a want much felt by mothers and invalids, and we think we are justified in saying there is no article of the kind which has proved of such sterling worth as the Food now in question. The reputation of this Nutritious Diet has found its way to the United States, repeated applications having been received from time to time by Ridge's Patent Food Co. (Limited), London, by gentlemen of high standing in the medical profession, requesting that an agency or manufactory might be put in operation. Prompted by their wishes, a company has been formed, and a manufactory established in Malden, Mass., where the Food is produced in strict accordance with Dr. RIDGE'S process, and well deserving of public patronage.

Much might be said in favor of the food, but as the public are to be the judges, we invite them to give the food a trial, believing that the introduction of this simple diet into the United States will be highly appreciated by both doctor and patients.

We herewith append two testimonials from gentlemen well known to the profession at home and abroad; also, a certificate from S. DANA HAYES, Esq., State Assayer and Chemist for Massachusetts:

TESTIMONIALS.

I have great pleasure in stating that Dr. RIDGE'S PATENT FOOD is a very valuable preparation, especially in cases where the digestive powers are unusually feeble. I first tried it in the case of an infant who was apparently dying from exhaustion and excessive vomiting, all kinds of diet having been tried in vain; as a last resort some of the PATENT FOOD was given, mixed with water, which was retained; the child rapidly improved, and now, after the lapse of some months (during which it has entirely lived on the PATENT FOOD), it is quite well and strong.

GEORGE B. MEAD, M. D.,
Licentiate of the London College of Physicians,
MINTMORE HOUSE, NEWMARKET,
LONDON.
March 24, 1865.

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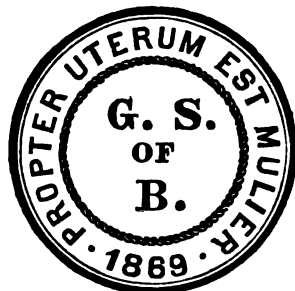
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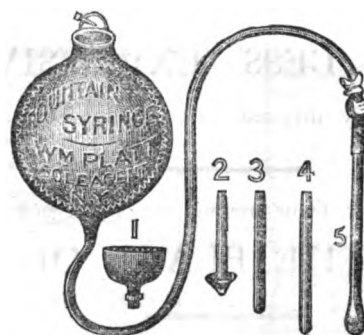
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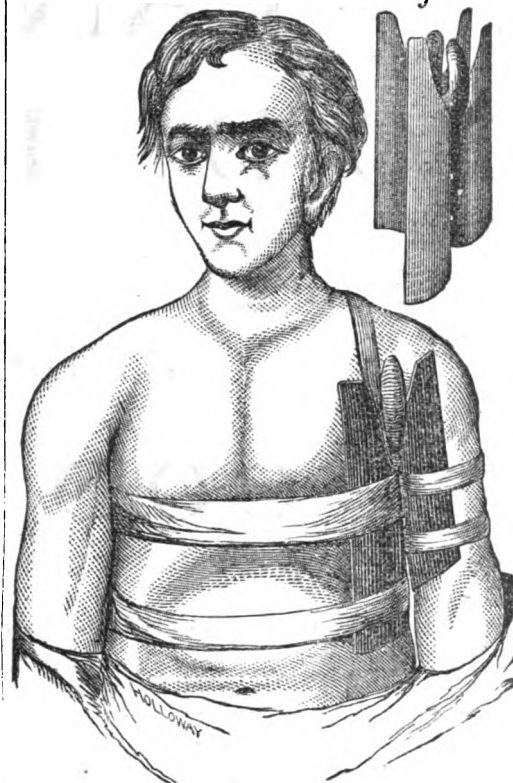
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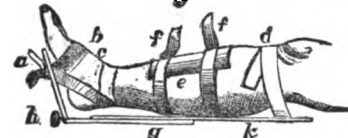
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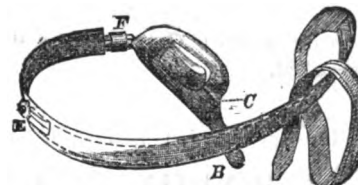
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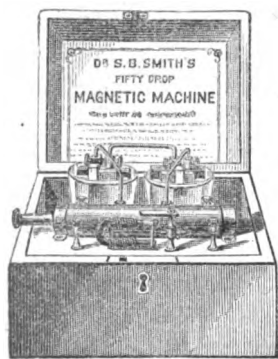
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Hydrate of Chloral in Pertussis—By Charles Murchison, M.D., L. L. D., F. R. S., Physician to the Middlesex Hospital, &c.—(*The Lancet*, October 29.)—The following illustrates the good effects of the hydrate of chloral in subduing the spasmodic cough of pertussis. The patient was a little girl, aged four, who was admitted into the Middlesex Hospital on April 11th, suffering from severe pertussis of about six weeks' duration, complicated with pneumonia and bronchitis. Various remedies, including belladonna and ipecacuanha, produced little or no effect upon the paroxysms, but improvement at once followed the use of chloral in doses of five grains every four hours, and within a week the paroxysms had almost ceased.—*Half-yearly Abstract*, January, '71.

Bromide of Potassium in Membranous Croup.—Dr. S. B. Kieffer, of Carlisle, Penn., has, during the last four years, employed bromide of potash in the treatment of membranous croup, and, as he claims, with uniform success. He does not believe that it acts as a solvent, but as a stimulant to the nerve-filaments and circulation of the throat. As the inflammation in membranous croup is usually of an asthenic character, it has the power, by its specific action, of equalizing the circulation and arresting the fibrinous deposit. He prescribes the bromide in grain doses every hour, combined with chlor. potass. and ipecac.—*Med. Times*, March 15, '71.

Quinine in the Diseases of Childhood.—C. Bing, M. D., Prof. of Pharmacology in the University of Bonn, Germany (*Am. Jour. of Obs.*), regards quinine as an important remedy in those diseases of childhood dependant on septic or zymotic conditions, like measles, scarlatina, and diphtheria. In scarlet fever, quinine should be given from the very commencement in sufficiently large doses, the progress of the disease carefully watched by the aid of the thermometer, and the doses increased in quantity if the fever grows threatening.

Of the acute exanthemata of infants, he would mention one particularly as being within the sphere of the influence of quinia, namely, *erysipelas neonatorum*. As a general rule, an internal dyscrasia, or an external putrid ulceration of the navel, is assumed as the cause of this fatal disease.

The action of quinine in this disease is attributed of the overcoming of the alteration of the blood to the diminution of the high temperature, and to the direct removal of the histological causes producing the erysipelas.

In pertussis, quinine has answered his expectations. Three conditions are absolutely necessary if we desire any good results from it in whooping cough. It should be given in solution; the dose should not be too small, and should not be administered in a vehicle that will prevent it from coming in contact with the mucous membrane in its passage through the pharynx. The preparation should only be given when dissolved in muriatic acid, unless we are desirous of employing the alkaloid combined with that salt.—*Med. Archiv.*, Feb. '71.

Dr. C. Powell Adams, of Hastings, has been in St. Paul for a couple of days, "courting." We learned many facts of surgical use from him, amongst others, one of great importance from its very simplicity, and to us entirely new, viz.: The use of cotton saturated in Monsel's solution, tied at regular intervals on a long string, a la "kite tail." These pieces are used as a vaginal tampon, being inserted one by one, and the string cut when the vagina is full—the piece of string left hanging from the vagina serving as a handle by which all the pieces are withdrawn in succession. All those who, like ourselves, have spent an hour at a time, pulling out pellets of cloth with the hooked index finger, will appreciate the great saving accomplished in this manner.—(*The egg of Columbus*. Ed.) *Ibidem*.

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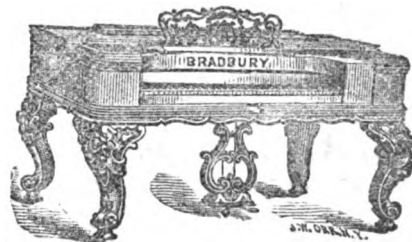
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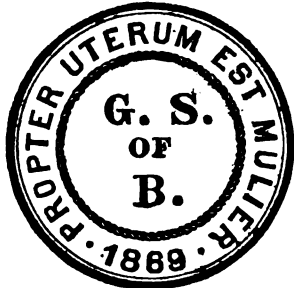
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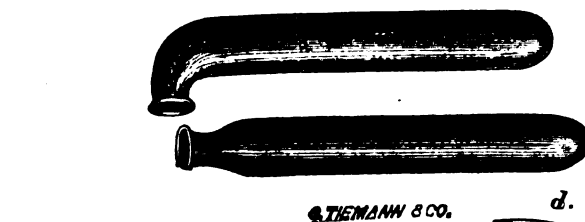
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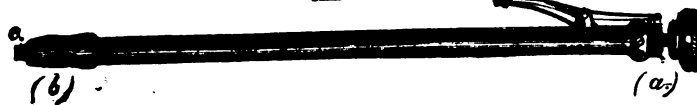
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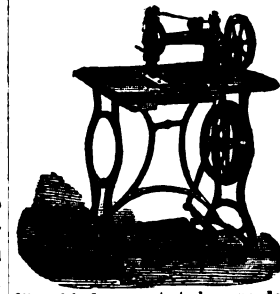
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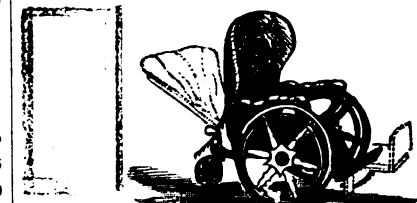
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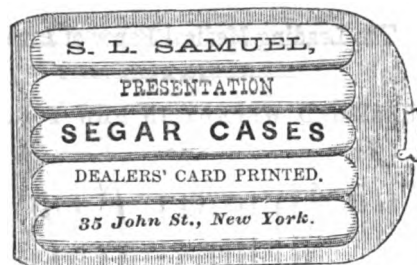
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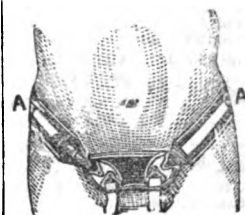
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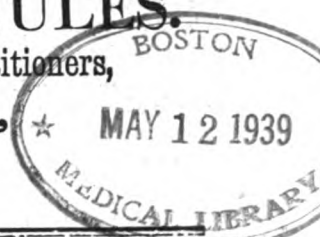
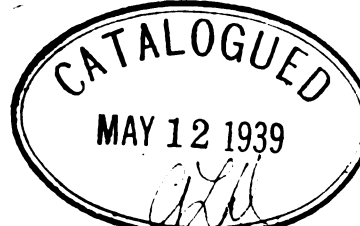
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" {Zingib. Jam. 1 gr.		40	1 75	" {Ferri. Cit. 1 gr.}			
" {Ferri Sul. Exsic. 1 gr.				" {Pulv. Cubebæ, 2 gr.			
" {Ext. Conil. ¼ gr.		50	2 25	Gonorrhœa. {Bals. Copaib. Solid. 1 gr.		60	2 75
Aloes et Mastich. (See Pil. Stomachicæ)		50	2 25	" {Ferri. Sulph. Exsic. ¼ gr.			
Aloes et Myrrh.		50	2 25	" {Terebinth. Venet. 1 ½ gr.			
Ammon. Bromid. 1 gr.		75	3 50	Hepatica. {Pil. Hydrarg. 3 gr.		80	3 75
Anderson's Scots. (See U. S. Dispensatory)		40	1 75	" {Ext. Coloc. Comp. 1 gr.			
Anti-bilious (Veg.) {Pulv. Ext. Coloc. C. 2 ¼ gr.		70	3 25	" {Ext. Hyosciam. 1 gr.			
" {Podophyllin. 1 ½ gr.				Hooper. (Female Pills) 2 ½ gr. U. S. Dispens.		40	1 75
" {Chinoidin. 1 gr.				Hydrargyri. U. S. P. 3 gr.		40	1 75
Anti-Chill. {Ferri Ferrocyan. 2 gr.		1 25	6 00	" {Mass. Hydrarg. 1 gr.			
" {Ol. Piper. Nig. 1 gr.				" {Comp. {Pulv. Pil. ¼ gr.		75	3 50
" {Arsenic. 1-20 gr.				" {Ipecac. ¼ gr.			
Anthelmintic.		1 00	4 75	" {Iod. et Opil. {Hydrarg. Iodid. 1 gr.		75	3 50
Antimony Comp.		40	1 75	" {Richards. {Pulv. Opil. ¼ gr.			
" {Ext. Nux. Vom. ¼ gr.				Iodoform et Ferri. {Ferrum per Hydro. 1 gr.		3 25	16 00
" {Hyosciam. ¼ gr.		85	4 00	" {Iodoform. 1 gr.			
" {Coloc. C. 2 gr.				Ipecac et Opil. 3 ¼ gr. (Pulv. Doveri.) U. S. P.		50	2 25
Asafoetida, 2 grs.		40	1 75	" {Leptandrin. 1 gr.			
" Comp. {Asafoetida. 2 grs.		40	1 75	" {Podophyllin. ¼ gr.		1 00	4 75
" {Ferri. Sulph. Exsic. 1 gr.				" {Podophyllin. ¼ gr.			
" {Asafoetida. 1 gr.				Lupulin. 3 grs.		40	1 75
" et Rhel. {Pulv. Rhel. 1 gr.		75	3 50	Opil. U. S. P. 1 gr.		80	3 75
" {Ferrum per Hydrog. 1 gr.				Opil et Camphoræ. {Camphoræ. 2 grs.		90	4 25
Bismuth. Subnit. 3 gr.		75	3 50	" {Pulv. Opil. ¼ gr.			
Bismuth et Ignatia.		1 50	7 25	Opil et Camph. et Tannin. {Camphoræ. 1 gr.		90	4 25
Calomel, ½ to 5 grs.		40	1 75	" {Acid. Tannic. 2 grs.			
" 5 grs.		50	2 25	Opil et Camph. et Tannin. {Pulv. Opil. ¼ gr.			
" et Opil. {Calomel. 2 grs.		85	4 00	" {Camphoræ. 1 gr.			
" {Opium. 1 gr.				" {Acid. Tannic. 2 grs.			
" {Calomel. ¼ gr.				Opil et Camph. et Tannin. {Pulv. Opil. ¼ gr.			
" {Ext. Rhel. ¼ gr.				" {Plumb. Acet. 1 ½ grs.		80	3 75
" {Coloc. C. 1-6 gr.		75	3 50	" {Podophyllin. ¼ gr.			
" {Hyosciam. 1-6 gr.				" {Pul. Hydrarg. 2 grs.		50	2 25
Cathartic Comp.		70	3 25	Podophyllin et Hydrarg.			
" {Podophyllin. Ext.				Potass. Bromid. 1 gr.		75	3 50
" {Colocynth. Virgin.				Potass. Iodid. 2 grs.		85	4 00
" {Scammony. Aloes		75	3 25	Quinin Sulph. ¼ gr.		85	4 00
" {Soap & Cardamon				" 1 gr.		1 40	6 75
" {Pulv. Aloes. Soc				" 2 grs.		2 75	13 50
" {Rhel. Opt.				" 3 grs.		4 00	19 75
" {Gum Mastich.				Quinin Comp. {Quin. Sulph. 1 gr.		1 75	8 50
Chapman's Dinner Pills.		60	2 75	" {Ferr. pr Hyd. (Quevenne's) 1 gr.			
Ceril Oxalat. 1 gr.		1 00	4 75	" {Acid. Arsenious, 1-60 gr.		1 75	8 50
Chinoidin Comp. {Chinoidin. 2 grs.				Quinin et {Quin. Sulph. 1 gr.			
" {Ferri Sulph. Exsic. 1 gr.		1 00	4 75	" {Ferr. pr Hyd. (Quevenne's) 1 gr.		1 75	8 50
" {Piperine. ¼ gr.				Quinin et Ferri. {Quin. Sulph. 1 gr.			
Chinchon. Sulph. ¼ gr.		75	3 50	" {Ferri Carb. (Vallett's) 2 grs.		1 75	8 50
" {Pulv. Aloes. Soc. 1 gr.				" {Strych. Sulph. 1-60 gr.			
" {Rhel. 1 gr.				Quinin et Ferri et Valer. 2 grs.		8 50	17 25
" {Sapon. Hispan. ¼ gr.				Rhel. U. S. P.		75	3 50
Cook's 3 gr.		50	2 25	Rhel. Comp. U. S. P.		75	3 50
" {Calomel. ¼ gr.				" {Ext. Coloc. C. 1 ½ grs.			
" {Sapon. Hispan. ¼ gr.				" {Colchicid. Acet. 1 gr.		90	4 25
Coloc. Comp. 3 gr. (Ext. Coloc.) Comp. U. S. P.		80	3 75	" {Hyosciam. ¼ gr.			
Colocynth. et Hydrag. et Ipecac.		75	3 50	" {Hydg. Chlor. Mit. ¼ gr.			
Copaibæ, U. S. P. 3 gr.		50	2 25	Santonin. 1 gr.		1 00	4 75
" et Ext. Cubebæ. {Pil. Copaibæ, 3 gr.		80	3 75	Stomachic. (Lady Webster's) {Pulv. Aloes Socot.		50	2 25
" {Oleo res. Cuc. 1 gr.				" {Dinner Pills. 3 grs.			
Diuretic. {Sapo Hispan. Pulv. 2 grs.		50	2 25	" {Flor. Rossæ			
" {Sodæ Carb. Exsic. 2 grs.				Zinci Valerian. 1 gr.		1 00	7 75
" {Ol. Bacce Junip. 1 drop.							
" {Pulv. Gualac. 3 grs.							
Dupuytren. {Hydg. Chlor. Coros. 1 1-10 gr.		50	2 25				
" {Pulv. Opil. ¼ gr.							
Ext. Valerian. 3 grs.		65	3 00				
" {Ergotine. 2 grs.							
" {Ext. Hellebore Nig. 1 gr.							
Emmenagogue. {Socot. Aloes. 1 gr.		1 40	6 75				
" {Ferri Sulph. 1 gr.							
" {Ol. Sabinæ. ¼ gr.							
" {Ox-Gall. 2 grs.							
" {Pow'd Jamaica Ginger. 1 gr.		50	2 25				
Ferri (Quevenne's) 1 gr.		50	2 25				
Ferri (Quevenne's) 2 grs.		75	3 50				
Ferri Carb. (Vallett's) U. S. P. 3 grs.		40	1 75				
Ferri Citrat. 2 grs.		50	2 25				
Ferri Comp. U. S. P.		40	1 75				
Ferri Iodid. 1 gr.		65	3 00				
Ferri Lactat. 1 gr.		50	2 25				
Ferri Pyrophosph. 1 gr.		40	1 75				
Ferri Sulph. Exsiccat. 2 gr.		40	1 75				
Ferri Valer. 1 gr.		1 00	4 75				
" {Fer. per Hyrogen. 1 ½ gr.							
" {Ext. Quassia. 1 gr.		75	3 50				
" {Nux Vom. ¼ gr.							
" {Pulv. Saponia. ¼ gr.							
Ferri et Quin. Cit. 1 gr.		75	3 50				
" 2 grs.		1 40	6 75				
Ferri et {Strychulæ. 1-60 gr.		75	3 50				
Strychniæ. {Ferr. pr Hyd. (Quevenne's) 2 grs.							
" {Ext. Gen. ¼ gr.							
" {Aloe Secot. ¼ gr.							
" {Pulv. Rhel. 1 ½ grs.		40	1 75				
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Digitalin. 1-60 gr.	75	3 50
Elaterium. (Clutterbuck's) 1-10 gr.	95	4 50
Extract Belladonna (English). ¼ gr.	40	1 75
" Cannabis Indica. ¼ gr.	40	1 75
" Hyosciamus (English). ¼ gr.	40	1 75
" Nux Vomica. ¼ gr.	40	1 75
Leptandrin. ¼ gr.	40	1 75
" ½ gr.	40	2 25
Mercury Iodide. ¼ gr.	40	1 75
" Red. 1-16 gr.	40	1 75
Morphine Acet. ¼ gr.	75	3 50
" Sulphate. 1-10 gr.	60	2 75
" ¼ gr.	75	3 50
" ½ gr.	99	4 25
" 1-6 gr.	1 10	5 25
" ¼ gr.	95	4 75
" Valerianate. ¼ gr.	46	1 75
Podophyllin. ¼ gr.	50	2 25
" ½ gr.	50	2 25
Potass. Permangan. Chryet. ¼ gr.	50	2 25
Quinin Valerianate. ¼ gr.	2 00	9 75
Silver Nitrate. ¼ gr.	75	3 50
Silver Iodide. ¼ gr.	75	3 50
Strychnia. 1-20, 1-40 and 1-60 gr.	40	1 75

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Spasmodic Stricture.—Spasmodic stricture sometimes very closely resembles organic stricture in its symptoms. It is, however, only by want of care that errors in diagnosis can arise. Cases occur in which all the symptoms of stricture endure for years, but in which, nevertheless, there is clear evidence to show that it entirely depends on muscular contraction, unattended either by inflammation or congestion. In these cases it will be noticed that the gentlest introduction of an instrument causes acute pain, that the point is arrested at a variable distance, that sometimes, to the patient's astonishment, he is able to pass urine in a full stream, and that the stage of the stricture varies with his general health. Chloroform is sometimes of great use in both the diagnosis and treatment of spasmodic stricture. Opium administered by the rectum, and belladonna locally applied, are sometimes useful, but especially the former. Rest, recumbency, and warmth, in the form of baths, are necessary. But in all these cases we must ascertain, as far as possible, the cause of the affection, and modify our treatment accordingly.—*Mr. W. S. Savory, in Braithwaite.*

Stricture and Irritable Bladder.—Belladonna is of great service as a local application to strictures of the urethra. It has a decided effect on cicatrices and growths of a fibrous character resembling them. A cicatrix becomes softer and more like the healthy skin around it, under the constant and continued application of belladonna. It may readily be applied to strictures by means of the oleum Theobroma as a vehicle. Two grains of the extract may be used in this way twice a day in conjunction with the regular introduction of the metallic bougie, in gradually increasing sizes.—*Mr. R. Harrison, in Braithwaite.*

Stricture of the Urethra.—Bougies with Bulbous Points. Bougies having constricted necks, terminating in a bulbous point, are of great value in the treatment of stricture. The flexibility of the constricted neck facilitates their adaptation to the urethral curves, and the conical shape of the shaft promotes the process of dilatation.—*Dr. F. J. Bumstead, in Braithwaite.*

Filiform Bougies.—"Filiform Bougies," the point of which is even smaller than one-third of a millimetre in diameter (No. 1 of the French scale), are indispensable in the treatment of tight stricture. The surgeon provided only with the ordinary instrument will find many strictures "impassable," which can readily be passed with smaller instruments, and in cases of retention of urine, will be tempted to resort to puncture of the bladder.—*Dr. F. J. Bumstead, in Braithwaite.*

Holt's Dilator.—Holt's dilator has a great defect in this, that the point is so large that considerable dilatation is often necessary before it can be brought to bear on the stricture. To obviate this it is recommended that the point should be made separate, so that it can be unscrewed, and in its place a filiform bougie attached. By this plan the instrument may, with a little time and patience, be inserted to the requisite extent in any case of stricture which is at all passable, and at a single sitting.—*Dr. F. J. Bumstead, in Braithwaite.*

The following plan has been repeatedly used with success in strangulated hernia: Place the patient in the most convenient position for taxis, inject hypodermically, immediately over point of obstruction, twelve drops of Magendie's solution of morphia; cover the patient's face with a towel, and pour over the tumor, from a considerable elevation, a bucket of very cold water; push the bowel back before the shock is recovered from. This plan will frequently succeed when all others have failed.—*Baltimore Med. Bulletin.*

Professor Liebig is to have the Albert Medal of the

Morbid Elongation of Bones.

Professor Langenbeck has recently read a paper before the Berlin Medical Society on the subject of "Morbid Increase of the Length of the Long Bones." In this paper he has called attention to the fact that the long bones, when subject to irritation during the growing period of life, are apt to increase in length and thickness. It seems strange that in all the experiments on the subject of bone growth it never occurred to any one to compare the bones of the corresponding limbs. He has observed in various cases, where the bone has suffered from some continued irritation—for instance, a joint inflammation, or a necrosis—that lengthening of the limb has followed. In one case, that of a little girl about nine years old, who had suffered for six years from chronic inflammation of the elbow-joint, he found, that though the bones of the forearm in both limbs were of similar length, the humerus on the diseased side measured one and a half centimetres more than that on the sound. A man, fifty-six years of age, who had had disease of the tibia since he was three years old, was admitted to the clinic with carcinoma recti, for which he was operated on, but died a few days after. On comparing the bones in this case, the diseased tibia was found two centimetres longer, measuring from the inner condyle to the point of the maleolus internus, and from the front borders of the internal joint surface of the knee along the crista to the front border of the ankle joint, no less than four and a half centimetres. From his observations Professor Langenbeck draws three conclusions, viz:

1. Morbid causes, which produce irritation and hyperæmia of the bony tissue, have, as a result, as long as the bone-growing period lasts, an increase in length as well as in thickness of the bone.
2. The increase of length concerns principally the diseased bone, but it can also be observed in a healthy bone of the same extremity.
3. The bone lengthened through this increase of growth retains its dimensions through life. An after-shortening through resorption does not take place, even although the original cause—viz., the bone disease—should long since have ceased to exist.

He then makes the proposition: if it be not possible to artificially regulate the growth of bone, and through that to hinder or accelerate it. With this view he made an experiment on a dog about eight weeks old, by inserting ivory pegs into the femur and tibia of the left side. About four months later the dog was killed, and on comparing the experimented bones with those on the opposite side, he found that, on measurement, the femur and tibia both showed an increase of five millimetres in length, making in the whole limb an increase of ten millimetres. Here also the fibula was lengthened to a corresponding extent as the tibia, though that could only have been caused by the extension exerted on it by the growing tibia; and, what is more remarkable, it had obtained this without losing its connection with the tibia, as took place in a case described by Parise.

Professor Langenbeck appears to think that though there might be some difficulty in persuading a patient, for instance, with a shortened limb through paralysis, to submit to five or six months' lying in bed, yet this observation may be of considerable importance to orthopedic surgery, inasmuch as it may be possible, by an application of extension apparatus, to so regulate the power that the bones themselves may actually undergo an extension.—*Berlin Correspondence of Lancet.*

[This theory ought to work favorably against the shortening of limbs after fractures.—*Ed.*]

Influence of the Weather over the Results of Surgical Operations, and the Value of the Barometer.—Dr. Addinell Hewson (*Penn. Hosp. Reports*), from an extended observation with reference to climatological physics, finds that in amputations all the months of the year give a mortality

while in a constant ratio with the dryness of the atmosphere the mortality from shock occurs. The weather materially controls the results of operations; the deaths were not quite 11 per cent. when operations were done with the barometer mounting; with it stationary, over 20 per cent.; and over 28 per cent. with it falling.

The British and Foreign Medico-Chirurgical Review, of July, in concluding a review of *Recent Works on Syphilis*—Lancereaux, Hill, Barton and Cullerier—uses the following language:

"Lastly, we may ask, Is there any rule to guide us in the treatment of syphilis by specifics or otherwise? In any given case can we say with certainty whether mercury should be used or iodide of potassium, or whether the case will do equally well without either of these remedies? To this we must answer, There is no absolute rule of this kind. There are, indeed, certain cases in which most surgeons prescribe mercury, and there are certain other cases in which most surgeons prescribe iodide of potassium; but, on the other hand, there are not wanting practitioners of experience and repute who tell us that all the forms of syphilis and its sequelæ will get perfectly well without any specific treatment at all. If there are any cases in which it is generally held that mercury is necessary, they are iritis and infantile syphilis, and yet we are now told that these cases do just as well without the specific as with it, while iodide of potassium, which has always been used for the less acute symptoms, is now thrown into the shade by fresh air and sea bathing! How far these views can be sustained it must be left to experience to decide, but at present it appears to us highly unwise to lay aside altogether the use of mercury. In cases of syphilitic retinitis we have the clearest proof of its value, and we should hardly be justified in withholding it in a case of this kind. And, if the specific treatment produces such marked and beneficial results where we have the opportunity of observing its effects closely, may we not conclude that its influence is similar in other cases where we are unable to watch the affected part with equal accuracy? Experience may indeed show that mercury is not necessary even in iritis and retinitis, but at present a surgeon would seem to be almost as much bound to give it in these cases as a physician would be to give quinine in an attack of ague. The organ which is affected is one of great delicacy, and of the utmost importance to the patient: mercury is nearer a specific remedy than any other we possess, and it cannot be said that any serious evils are likely to follow its careful and moderate use. Thus, though we may say that there is no absolute rule to guide us in the administration of specifics, yet there are various cases in which it would seem that the surgeon is hardly justified in withholding mercury, and there are others in which pretty nearly the same thing may be said of iodide of potassium. In this opinion we are confirmed by observing the authors, whose works we have been noticing, all agree in recommending the cautious and temperate use of specific remedies."

Chronic Cystitis, or Catarrh of the Bladder.—The most common cause of this disease, which is very improperly named, is inability of the bladder, either from atony of its coats, or from prostatic obstructions, to empty its contents. It is no more a disease of itself than dropsy is. There is in this affection a great quantity of viscid mucus in the urine, and if the vessel be emptied the urine passes off first, and the mucus follows in a tenacious mass. The first thing to be done is to empty the bladder by a catheter, once, twice, or three times a day, in the easiest manner possible. If this does not succeed, the bladder must be washed out at least once a day with a little warm water before withdrawing the catheter. Never, however, under any circumstances, must more than two ounces be thrown in. If this does not answer, inject the bladder daily with four ounces of warm water, containing one grain of acetate of lead. After this comes the dilute nitric acid; one or two minims to the ounce of water. An injection of warm water, containing glycerine and biborate of soda, is a very useful one indeed.—*Sir H. Thompson, in Braithwaite.*

Sulphite of Soda in Chronic Cystitis.—Mr. L. Willcox, late house-surgeon of King's College Hospital, recommends the use of sulphite in those cases of chronic cystitis where the urine decomposes before it is eliminated. He finds that by the employment of sulphite of soda all the puridity disappears, and the urine becomes clear and

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Of your Persian Healing Soap I can say: One of my young men cured pimples on his face, of many months' standing, in 10 days, leaving his face entirely smooth.

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We claim for it, as a disinfectant, strictly speaking, superiority over all other articles, not excepting any now known and used as such.

And, as growing out of its general character as a disinfectant, we specify the following uses for it, and for its value in every one can produce most unquestionable testimony:

It will purify the most offensive atmosphere.
It will cleanse and cure Erysipelas, all sorts of sores, ulcers, boils, cuts, wounds, &c.
It will prevent gangrene.
It will cure burns, scalds, and bruises.
It is a perfect pain-killer.
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It will, therefore, cure stings or bites of insects.
It will cleanse and purify the breath, and hence is an excellent tooth wash and healthful cosmetic.
It will cure diarrhoea, even the worst chronic cases.
It will instantly relieve horses of the colic or persons of heart-burn.

It will, owing to the bleaching properties of Chlorine, remove all ink spots, mildew, vegetable stains, &c.

It will cure Catarrh.
It will remove rancidity out of butter and lard.
It will, properly used, be more efficacious than any other agent in preventing the spread of contagious diseases, and has frequently done it.

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Dermatology.

Lupus Erythematosus: Its Nature and Treatment.

Lupus erythematosus was described by Hebra, in 1845, as *seborrhœa congestiva*.

Dr. Moritz Kohn thus describes the disease: "Lupus erythematosus is met with in the form of round or roundish patches, varying in size from that of a farthing to that of the palm of the hand, of which the centre is formed by a smooth, thin, dirty yellowish-brown crust, a dirty white mass of scales, or by a flat, depressed, cicatrice-like white shining skin; whilst the peripheral circular line forms a rather compact eminence, which is bright red, and half a line to a line broad, and covered with yellowish-white or dirty yellow little scales and crusts, and has a punctated or eroded look around the central depressed part, and is sharply marked off from the neighboring perfectly normal skin." In patches such as those just described we find lupus erythematosus on the cheeks, on the bridge of the nose; and in form it may suggest the idea of a butterfly, if we consider the spot on the nose to be the body, and those on the cheeks to be the wings of the insect. There may only be the spot on the nose, however, and none on the cheeks. Patches are found on the tip of the nose, on the eyelids, on the pinna of the ear, the lips, the hairy scalp, the palm of the hand and fingers, the neck, the trunk, as far down as the mammæ and to the elbows, and lastly, the toes are sometimes the seat of the disease. Although the separate productions of lupus erythematosus may go through a kind of "retrograde metamorphosis," still at some parts they persist, and the morbid process may last months and years. After the lapse of years the morbid process spontaneously disappears, but leaving on the affected parts central smooth cicatrices with a peripheral pigment border, or a totally thinned, dry, and slightly sensitive skin; this remains as a permanent disfigurement.

As regards the *therapeutics* of lupus erythematosus, Dr. Kohn thinks that most dependence is to be placed on external remedies, although in strumous and chlorotic subjects internal remedies may be given with advantage. He thinks struma, tuberculosis, &c., have no influence on the development of the disease, as it sometimes occurs in well nourished, strong, and perfectly healthy individuals.

The local treatment he recommends consists in removing the accumulated sebaceous secretion by means of applications of oils and various soaps; the use of "spiritus saponatus kalindus" (sapon. viridis, 3 iv.; sp. vini. rect. 3 ij.; spir. lavand. 3 ij.); liq. potassæ; carbolic acid and the mineral acids; also sulphur (in powder), solid nitrate of silver, chloride of zinc paste, and the emplastrum mercuriale.—*Journal of Cutaneous Medicine*.

New Remedies in the Treatment of Skin Disease.—Dr. McCall Anderson is at present engaged in the investigation of the virtues of certain new remedies in the treatment of diseases of the skin, in the Glasgow Skin Dispensary, and amongst others, of carbolic acid administered internally, and of coverings of vulcanized India rubber, and India rubber cloth. He has a very high opinion of the value of both in appropriate cases, but he has not yet tested them sufficiently to enable him to state with precision the exact limits of their usefulness.

Among others he published the following cases in the *Glasgow Med. Journal*: *Exema of Hands, Erythema Papulatum, and Psoriasis Palmaris* he treated with *India-rubber gloves*. Several cases of *Psoriasis* he treated by carbolic acid. B. Acidi Carbol. Cryst. 3 iss., Glycerini q. s., aq. distil. 3 vi., M. Sig.—A teaspoonful in a wine-glass of water, three times a day, on an empty stomach.

In the *Times and Gazette*, April 17, 1869, Mr. Hutchinson reports eight cases of *herpes zoster*, at the Hospital for Skin Diseases, occurring after the continuous administration of the use of arsenic. He had, in a former number of the *Journal*, reported a similar number, the

majority of the whole having been observed in his own practice. He is disposed to conclude from this clinical experience that there must be some connection between the use of this drug and the supervention of *shingles*.—*Rich. and Louisville Medical Journal*.

W. St. John Coleman, in the *London Lancet*, speaks of his success in treating *chronic eczema, eczema rubrum, eczema facii*, and an obstinate case of *impetigo larvalis*, with carbolic acid. To an eight ounce phial of glycerine and water he added about ℥ xx of pure carbolic acid, and applied it locally night and morning.

Roussin, from his own and others' observations, arrives at the following conclusions:

1. The human skin, with its epidermis, is not moistened by water, and can therefore absorb neither liquid water nor substances solved in it.

2. Nor does previous treatment with soap render the skin irriguous for a long period, or able to absorb watery solutions.

3. The fatty coating of the epidermis admits of absorption by the skin only from a fat vehicle.

4. When a salt, in a state of fine distribution, comes in contact with the external surface of the skin, a certain absorption takes place, the fatty coating taking up the powder and bringing it in the condition necessary for capillary progress.—*Baltimore Med. Bulletin*.

Personal.

Dr. Austin Flint, Jr., we see from the *Archives Generales* of July, has received a prize from the French Academy of Sciences, *pour ses recherches experimentales sur une nouvelle fonction du foie, expériences originales et d'un grand intérêt pour la pathologie et la physiologie*.

Dr. Lewis A. Sayre has been elected an honorary member of the Medical Society of Norway, Christiania.

Dr. Frank H. Hamilton has recently received the degree of L.L. D. from Union College.

Diploma of the Bellevue Hospital Medical College.—The diploma of this flourishing Medical Institution is officially recognized by the Royal College of Surgeons, England.

Claude Bernard, the Physiologist.—This celebrated physiologist has been called by Napoleon III to the French Senate. He is now, besides Academician and Senator, Professor of General Physiology at the Museum, Professor of Experimental Medicine at the College de France, Annual President of the Académie des Sciences (l'Institut), Life President of the Société de Biologie, Member of the Academy of Medicine and Commander of the Legion of Honor. Twenty-five years since, Claude Bernard was an apothecary's assistant in a country town.—*Record*.

Accident to Professor Bunsen, of Heidelberg.—This eminent chemical philosopher has lately been severely wounded in the face and hands by a laboratory explosion. It will be remembered that Professor Bunsen almost lost an eye some time ago by a similar explosion, but completely recovered.

Busts of Trousseau.—Two busts of Trousseau have just been finished: one for the Hall of the Faculty of Medicine, the other for the peristyle of the Hôtel Dieu.

Dr. W. Maxwell Wood has been appointed Chief of the Bureau of Medicine of the U. S. Navy, his commission bearing date July 1st, 1869. Dr. Wood stands ninth on the seniority list of the service, and has passed nearly thirty-five years in the service of his country.

Testimonial to Mr. Syme.—At a preliminary meeting of a few former pupils of Mr. Syme, held at the house of Dr. Murchison, July 24th, it was resolved to call a general meeting in October, in London, for the purpose of inaugurating a testimonial to Mr. Syme, on the occasion of his relinquishing the chair of Clinical Surgery in the University of Edinburgh. It is proposed that this testimonial should have a twofold object, viz: first, to place a marble

bust of Mr. Syme in the hall of the new Royal Infirmary of Edinburgh; and secondly, to found a fellowship in surgery in the Edinburgh University, to be called "The Syme Surgical Fellowship."—*London Lancet*, July 31, 1869.

The *Quekett Microscopical Club*, of London, counts 522 members.

International Congress of Alienist Physicians.—This is to be held either at Brussels or Ghent, from October 4–11 of the present year. The subscription is fixed at 20 fr., and M. Lunier, 52 Rue Jacob, Paris, officiates as general secretary, to whom communications are to be addressed.—*Med. Times and Gazette*.

Congress of German Naturalists and Physicians, 1869.—Profs. Rembold and von Barth, managers of the forty-third Congress, have just issued the programme. It is to be held during the 18–24th days of September. Subscription, three thalers. The whole of natural and medical science is embraced. Applications to be addressed, post free, to Professor Rembold, Innsbruck.—*Med. Times and Gazette*.

Dr. William Rutherford, F. R. S. E., assistant to the Professor of the Institutes of Medicine in the University of Edinburgh, has been unanimously elected to the Professorship of Physiology in King's College, London, rendered vacant by the retirement of Professor Lionel Beale, F. R. S.

A New Prize.—Prof. Louis Elsberg offers two prizes, one for an illustrated report of the clinic of diseases of the throat, at the University Medical College; the other for an anatomical preparation of the pharyngo-nasal space. These prizes are open for competition to all medical students.—*Med Record*.

Prize Essays.—Dr. Samuel Willey, President of the Minnesota State Med. Society, offers two prizes of \$50 each for the best essays: one on "Endemic and Epidemic Diseases of Minnesota;" the other of "Cerebro-Spinal Meningitis." Dr. A. Wharton, of St. Paul, is chairman of the committee on the first, and Dr. S. D. Flagg, of St. Paul, is chairman of the second.

A Prize Offered by the Infant Protection Society of Lyons.—The Infant Protection Society of Lyons, wishing to encourage mothers to nurse their children, will give, at its meeting in 1870, a prize of 300 francs to the author of the best paper on the following subject: "Concerning the influence of nursing on the body and mind of the mother. Of accidents and sickness, which follow the mother's neglect of this duty."

The Society desires that the papers, treated in a scientific manner, shall be written with such clearness and simplicity that they shall be understood by the outside world as well as by physicians.

The papers should be addressed, according to the Academical form, to Dr. Fonteret, Secretary General, Celestins St., No. 2, before the 1st of December, 1869.—*Gazette Hebdomadaire*.

The number of students in medicine, during the summer session, has been 409 at the University of Berlin, 329 at that of Wurtzburg, 246 at Munich, 134 at Zurich, 141 at Halle, and 141 at Marburg. During the same session there were 487 students at the Faculty of Strasburg.

Post-Partum Hemorrhage.—In a case of very severe post-partum hemorrhage, in which no contraction whatever of the uterus could be obtained, and it was evident that death would soon ensue, the author pursued the following plan with success: He took a large sponge, and having washed it in cold water, squeezed it as much as possible, and introduced it into the womb; contraction immediately took place round the sponge, and a bandage having been applied over the abdomen, the hemorrhage ceased. In about three days it was expelled into the vagina, whence it was withdrawn by a string, which had been tied to it previously to its introduction.—*Dr. F. E. Wilkinson, in Braithwaite*.

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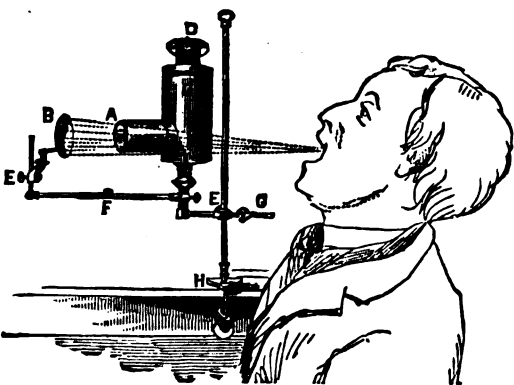
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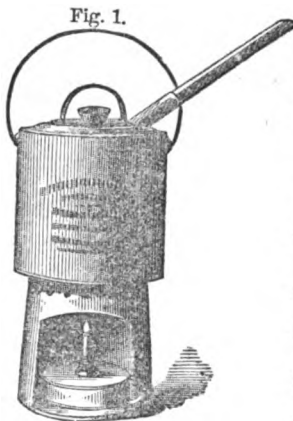
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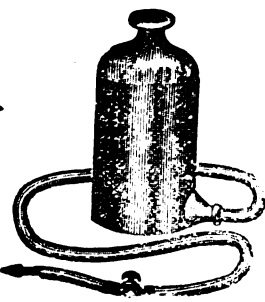
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By DR. KEYSER, OF PITTSBURGH, PA.

Of all the darts of affections, whether we regard them on account of their peculiarity from other skin diseases, or because of the painfulness and dreadful insomnia which accompanies them, Eczema is worthy of particular mention. Especially is this the truth, if, in the treatment of such a case, any shortening of the course of the disease can be arrived at, and any amelioration of its terrible symptoms. The case to which we allude was in a subject that had been afflicted twice before, perhaps three times, we are not sure which; and during one of those attacks had been confined to the room for the greater part of three months. In each of the attacks the disease was complicated with pneumonia, or, as we would state it, pleuro-pneumonia. At least this is true in the attacks in which our services were brought into requisition.

The febrile symptoms ran high; rigors, pain, dyspnoea, and all the prodromic symptoms marked the attack as one that was to be of unusual violence and of long duration. We speak now of the pulmonary disease. This, however, was greatly lessened, on the third day, by the appearance of the vesicular stage of the disease, which covered nearly the whole surface of the body. The head, and ears, and eyes, were especially involved in the attack, and the pulmonary malady was greatly alleviated thereby. We do not overstate the case when we say that handfuls of scales could be picked from the bed-sheets of the patient after the period of desquamation had intervened. The palms of the hands and soles of the feet peeled off in great scales, leaving the under cuticle new and entire; tender, of course, from the important change which had occurred, but still new, and the epidermis presenting a glow of health and a newness of life which could not be otherwise than gratifying to both patient and physician. There was in this patient a peculiar redness of skin which we have noticed to be a distinguishing mark of the darts of diathesis, from observations made in a large number of cases. We have frequently observed, as a note by the way, that all pulmonary cases are greatly alleviated by any eruption showing itself upon the surface of the body; acting vicariously, instead of the usual blistering and croton oil applications, whose beneficial influences have, in my mind, sometimes created considerable doubt, and at times we have thought it good practice to abandon them altogether.

That the eruption saved, in this case, the internal organs, we have no manner of hesitation in averring, as at once, upon its appearance, the pulmonary congestion was greatly ameliorated.

The great difficulty, in the case of our patient, was the terrible insomnia, to relieve which, conium, Dover's powder, and other soporifics were resorted to, with no obvious effect, except to relieve the inordinate burning, which he described "as like fire." Some good might have been achieved from their otherwise quieting effects, and allaying the morbid irri-

tability of the general system. What, however, did the most good in this way, was the scutellarin, in doses of two grains, repeated at intervals of three hours. This had a quieting and soothing effect, and greatly alleviated the sufferings of the patient.

The only medicine from which we could perceive any effect in producing sleep, was "McMunn's Elixer," one teaspoonful of which procured the first sleep the patient had during the first ten days of his sickness.

Having seen the acetate of Potass highly recommended in the United States Dispensatory as useful in eczematous cases, we combined it with syrup of ipecac, in appropriate doses, to act in a double way, as a diuretic and sudorific, believing, at the same time, to control the pulmonary affection thereby, which it did in an effectual manner. We followed, besides, for the chest affections, Dr. Chambers's mush poultices to the affected side, as a relief to the pulmonary disease, although we have reason to believe that our orders, in this regard, were but partially carried out, and at the same time believe that it would have greatly expedited the cure, by a more careful observance and execution of our instructions. The bowels were kept in a soluble condition by simple aperients, with a view to their effect upon the hepatic secretions, and when this was not sufficient, castor oil, at all times a safe and harmless aperient.

The prurigo was more relieved by applications of borate of soda, morphia, glycerine and aqua camphora, which greatly mitigated the continued burning, and was worth all the other local applications, among which was olive oil, carron oil, carbolic acid in an appropriate solution, besides the usual ointments used in such cases. We have seldom found much, if any, benefit derived from these local applications, either in eczema or any other of the skin affections. They may lessen the suffering, but do nothing towards abbreviating the disease.

The conclusion at which we have arrived is, that the disease must be treated as one having its origin in the blood, which is more readily corrected by eliminating medicines and a cooling regimen, than in any other way.

The result of the case seems to justify us in this belief; having been but three weeks in bed, and only four weeks until the patient was able to go to work, whilst in former attacks it lasted two, and in one of them, if we are correctly informed, three months. The eczematous affection, having attacked the scalp, the hair, without our orders, was cut, and which would have been done the second time, but for our peremptory orders not to have it done. When asked why it was done, the answer was, "It will come out any how." Our answer to this was that it would then obviate the necessity of having it done. We have only to say that the hair has not come out, nor was it cut off a second time.

During the recovery we used Elix. of Calisaya as a tonic, and with wonderful effect. If the publication of this will throw any light on the disease of which we are treating, we will feel that we have done a good work, and contributed our mite toward the amelioration and cure of a painful and hitherto untractable disease.

TRIUMPH OF SURGERY.

*A Lecture by Frank H. Hamilton, M. D., L.L.D.,
Professor of the Practice of Surgery, &c., in Bellevue
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The third lecture of the Scientific Course before the American Institute was delivered last night, at the Academy of Music, by Prof. F. H. Hamilton, of Bellevue Hospital Medical College, on the "Triumphs of Modern Surgery." Prof. Hamilton said:

Ladies and Gentlemen: To one who has devoted a large portion of his life to the subject of Surgery, who has himself been a witness of many of its failures and successes, who has had occasion at one time to lament its insufficiency, and at another to exult in its triumphs, the theme which I have chosen for this evening's discussion is full of interest; but I cannot very well understand how you can be attracted by a narrative of events which are so much out of the usual course of popular thoughts and tastes, and which are constantly invested with painful and tragic associations. This is the subject, however, which I have ventured to intrude upon you, trusting that it will not prove wholly uninteresting even to the present audience.

It is not to be understood that prior to the general decay of letters, surgery had made no progress. There can be no doubt that surgery was practiced in some manner from the earliest periods of human existence; but the first written accounts we have of our art are derived from the Greeks, according to whom Apollo was the God of Medicine and Surgery, as well as of Music. At length, however, Apollo resigned the Department of Medicine and Surgery to his son Esculapius. Homer has celebrated the fame of Machaon and Podalirius, sons of Esculapius, who accompanied the Greeks to the siege of Troy, 1192 years before Christ. Machaon being wounded by Paris, Achilles brought old Nestor to take good care of him. "For," he says, "a leech who like him knows how to cut out darts, and relieve the smarting of wounds by soothing unguents, is to armies more in value than many heroes." In direct descent from Esculapius came Hippocrates, who was born in the island of Cos, 460 years before Christ. He was the first to leave any written records of his opinions and practice in Surgery.

But it is not my intention to review the early history of Surgery, which, gradually in the succeeding centuries advanced to the rank of a science, and was illustrated by many distinguished Greek, Roman, and Arabian surgeons. Whatever stores of surgical knowledge had been accumulated were in a great measure lost, or lay buried in the libraries of the priests and monks, during the period intervening between the fifth and fifteenth centuries. The discovery of the art of printing by Laurentius of Harlaem, about the year 1429, paved the way for the revival of letters; and Surgery was among the first to awaken from her long sleep; but no durable foundation was laid until the beginning of the next century, when anatomy was first taught systematically from human dissections, in Padua, by Vesalius, a native of Brussels. Herophilus and Erasistratus, distinguished Egyptian surgeons, under the protection of Ptolemy Soter, had been permitted, about 300 years before Christ, to open and inspect the bodies of executed criminals; and similar privileges had been extended to other surgeons in later times; but neither the Greeks nor Romans encouraged dissections, while the study of anatomy was strictly forbidden among the Mohammedans.

Ambrose Paré—Ligature.

Ambrose Paré, born at Laval, in France, in 1509,

was a member of the fraternity of barber-surgeons; but, such was the reputation he acquired as an operator, he was made surgeon to four successive sovereigns of France, and, among others, to the weak and cruel Charles IX., by whom, however, although Paré was a Huguenot, his life was saved on the terrible night of the massacre of St. Bartholomew, by detaining him in the royal chamber until morning. With Paré, who lived little more than 300 years ago, we may commence to date the achievements and triumphs of modern Surgery. Hitherto, after amputations, the bleeding vessels had generally been secured by searing them with cauterizing irons, or by dipping the end of the stump in boiling oil or molten lead. Paré revived the ligature, which, although it had been suggested, and probably adopted in a few cases several centuries before, had been forgotten or abandoned by his immediate predecessors. Such was the mortality under the old process of securing the vessel, that Guy de Chauliac declared that it was better to let the limb drop off than to amputate with the knife; and he advised ligating firmly at the nearest joint, and thus to cause gangrene and sloughing of the limb below. Since Paré wrote, great improvements have been made in the application of the ligature, and its usefulness has been greatly extended; especially is it proper to mention its application for the reduction of vascular tumors, including elephantiasis, for the relief of epilepsy, and for various other maladies in which it is known that organs are suffering from an excess of blood; but the greatest achievements of the ligature have been in the cure of aneurisms.

Aneurisms.

The arteries which convey the blood from the heart to the various portions of the body, consist of a trunk with many branches. When at any point the walls of a vessel give way and become expanded into a tumor called an aneurism, threatening a sudden and complete disruption, it becomes necessary to tie the artery on the side nearest the heart; and, as Mr. Hunter has shown, sufficiently remote from the aneurism to insure a healthy condition of the vessel at the point of the application of the ligature. You will now understand how essential to the surgeon is a knowledge of minute anatomy; and how impossible it was to have saved the lives of these patients, or to have performed many other operations in surgery, in those periods of the world when human dissections were not permitted. Nor, let it be understood, can a practical knowledge of anatomy be acquired by a study of the most carefully-executed models, prints, or colored drawings. They furnish valuable aid to beginners, and serve a useful purpose in refreshing the memory; but to know how safely to tie an artery, lying deep within the living body, surrounded by muscles, nerves, and veins, in the neighborhood of viscera whose lesion would be fatal, the operator must have made careful and repeated dissections upon the cadaver. His knife must be guided by a steady hand and an intelligent brain. Like the mariner among the rocks in a dark night, he must be able to avail himself of every object which by accident comes into view to direct his course.

Aided by the exact knowledge thus obtained, and profiting by the experience of those who have preceded them, surgeons have advanced from the ligature of one artery to another, until the two largest arterial trunks in the body have been tied; and, in the case of one of them, the ligature has been applied successfully almost at the very point at which it emerges from the heart. For example, the femoral artery, which supplies most of the lower extremity,

was first tied for aneurism by Hunter, according to the method which has received his name, about the year 1785. At the present day the same operation has probably been performed successfully many thousand times. In 1796, Abernethy, the great Scotch surgeon, tied the external iliac. In 1812, Dr. Alexander Stevens, whose death took place in this city only about two years ago, tied successfully the internal iliac; an operation which was soon repeated by Atkinson and Mott of New York, and by White of Hudson on the North River. Up to this date this latter operation has been performed nine times, with four successes. Gibson, of Philadelphia, first tied the common iliac in 1812, in the case of a wound, but unsuccessfully. It was reserved for Dr. Mott, in 1827, to make the first successful operation on this artery, in a case of aneurism.

To appreciate the skill and the boldness requisite for its performance, it must be understood that the artery in question lies at a great depth within the cavity of the belly, near the backbone; and that, to reach it, the operator must carry his dissections in a circuitous route from before, around the viscera to the back. Moreover this great trunk is the only direct channel of supply for the whole of the lower extremity. How could the limb survive the complete interruption of its nutritious channels? Experience had already shown that a great part might with impunity be cut off, as in the case of the ligation of the femoral and external iliac, the dilatation of the small collateral branches and their inosculations being sufficient speedily to restore the normal circulation. But how was it to be with the common iliac? No one could say. Mott made the experiment, and succeeded in saving the life of his patient. The operation has now been made with equal success many times, and it has accordingly taken its place as one of the established expedients of surgery.

The common carotid artery, the great artery of the neck, which furnishes the chief supply of blood to the head, was first tried for aneurism by Sir Astley Cooper, in 1805; but this was unsuccessful. He repeated the operation, however, with success in 1808. Dr. Wright Post of New York was the first successful American operator; since which time few surgeons of much experience have not repeated the experiment.

Innominate—Dr. Valentine Mott.

The crowning triumph of the ligature remains to be mentioned. The innominate is that great artery which, arising from the aorta, near the heart, lies through its whole course entirely within the cavity of the chest, being only about one inch and a half or two inches in length, and then dividing into the right carotid and right subclavian, which supply respectively the right side of the head and the right arm. This artery was first ligated by Dr. Mott, then 33 years of age, on the 11th of May, 1818, in the old City Hospital on Broadway. The patient survived only 28 days. The operation was, therefore, unsuccessful; but the possibility of its ligation in the living subject had been demonstrated; it had been proven that the circulation would be speedily restored in the parts thus suddenly deprived of blood, and the causes of failure had in some measure been ascertained. Encouraged by the delay in the fatal issue of Dr. Mott's case, the operation was repeated from time to time until six successive failures led the great French surgeon and the friend of Mott, M. Velpeau, to say, "Is it not enough to pronounce an inexorable verdict against such an operation, and," he adds, "I do not hesitate formally to proscribe it." Other surgeons reiterated the sentiment expressed by Velpeau. Nevertheless Dr. Mott was not without

hope, as he himself has said, "that some one is destined, in the brilliant march of surgical triumphs, to meet with success. My hopes," he adds, "are not at all dampened by the hitherto repeated failures of this operation; and I fully anticipate that the day may come when some one of my countrymen may yet be heralded as the successful operator. I am free to say that if ever a case should present itself to me again, I should tie the primitive carotid at the same time that I tied the innominata."

These were the hopes and declarations of Dr. Mott in 1836. During the subsequent years the operation was again and again repeated by surgeons, until the total number of failures was 13, not including four cases in which surgeons of great skill had commenced the operation and found themselves compelled to desist, leaving the operation unfinished. No one had yet fulfilled the prophetic anticipation, and been heralded as the successful operator. Dr. Mott, however, as I know from personal conversation with him, never relinquished his confidence in its final triumph. Nearly half a century had elapsed since he first tied the innominata, when he received the intelligence that Dr. J. W. Smyth of New Orleans had been successful; having tied not only the innominata and common carotid at the same time, as suggested by Mott, but subsequently the vertebral. This operation was made in 1864, and at last accounts the patient was in complete health. Dr. Mott had been permitted to live to see his judgment vindicated, and his prophecy doubly fulfilled. The operation had not only been successful, but one of his own countrymen had been the successful operator. The ligature of the innominata was but one of the many achievements in surgery which rendered Dr. Mott so justly distinguished, both at home and abroad. No American surgeon has ever occupied a position of equal eminence; and it is doubtful whether any European surgeon has had a wider reputation.

Permit me, ladies and gentlemen, to so far digress from the subject of my discourse as to make an appeal in behalf of the memory of Dr. Mott; and this cannot be better presented than in the language of one of his biographers, the distinguished Dr. S. D. Gross, of Philadelphia, who says: "Dr. Mott performed a greater number of capital surgical operations than any surgeon who ever lived," and "no American surgeon ever received so many testimonials of respect and esteem from medical, literary, and scientific societies, both domestic and foreign. It is fitting, then, that the age which owned him, and which he adorned and illustrated, should make a recognition of his services, that those who may come after him may emulate his character." But what has the age and the city which he has adorned done for his memory? The tender affection of a beloved wife has consecrated to his name a building and a library on Madison ave.; but by the citizens of this great, wealthy and liberal metropolis there has been made no substantial testimonial of respect. I shall not refer to what New York has done for men justly distinguished as statesmen, as military chieftains, and to others to whom the world seemed to be indebted; but I can with propriety ask whether the debt of obligation is lessened by the fact that the courage, science, and skill of our great surgeon were devoted wholly to the mitigation of human suffering and for the saving of human life? In Great Britain, measures have been taken to erect a hospital to the memory of Dr. Symes, the distinguished Scotch surgeon, lately deceased; and to Americans an appeal has been made to contribute in aid of the fund required. A similar testimonial to the memory of Dr. Mott, it seemstome, would be eminently appropriate.

Amputations.

In the amputation of diseased and broken limbs, surgery has made very great advances in modern times: First, by the substitution of the ligature for the cauterizing irons and other barbarous modes of arresting hemorrhage, as has already been stated. Lately, however, it has been proposed to substitute for the ligature a method technically known as "acupressure;" and by other surgeons "torsion" of the vessels has been recommended and practiced. Both of these methods of procedure are still under judgment; and they will not demand of us, therefore, a more particular notice. One of the most important questions in amputation is that which relates to the period of time after the receipt of an injury at which it is most safe to operate. To determine this question, the hours, days, and weeks succeeding upon the accident are divided into periods, termed respectively the "immediate," "primary," "intermediate," and "secondary," but which I shall name for the convenience of explanation: First, or period of shock and depression, which continues in most cases from six to twelve hours; second, the period of moderate reaction, terminating usually within 24 or 48 hours; third, the period of inflammation, extending from the time at which full reaction takes place to the tenth or fourteenth day, or more or less; and fourth, the period of suppuration. A comparison of the results in a sufficient number of accurately recorded cases has at length determined that the four periods stand in the following order of relative safety: The second, or period of moderate reaction, is the most favorable; the third, or period of inflammation, is the least favorable; the first and fourth periods occupying about the same rank, namely, less favorable than the second and more favorable than the third. One of the practical inferences drawn from these facts is, that the first duty that a surgeon upon the field of battle has to perform, in a large proportion of those unfortunate cases in which the limbs demand amputation, is to administer a little wine, with a few words of encouragement, and to pass on to those in whom reaction having taken place, the condition is more favorable to success.

Another question, undetermined until within a few years, is at what point is it most safe to make an amputation? Thus, for example, if a limb is hopelessly shattered or destroyed as high as the knee-joint, will it give the patient the best chance of life to amputate at the knee, or to avoid this joint, and remove with the leg a portion of the thigh? Fifty years ago, joint amputations were regarded as extra hazardous; but the results of a larger experience, carefully collated, have proven that this opinion was erroneous, and we have at length been able to establish a law, which in every point of view is of the greatest importance to the patient who is to suffer amputation, namely, that in all cases the surgeon must save as much of the limb as possible, without reference to the question whether, in so doing, he is compelled to amputate at a joint, or through the shaft of a bone.

One question, however, hitherto undetermined (relating to hip-joint amputation), has at last, and by one of our own army surgeons, been decided, namely, whether the life of the patient can ever be saved when it becomes necessary, as the only alternative remaining, to make an immediate or primary amputation at this joint, after a gunshot injury. In all, 72 immediate and primary amputations at the hip-joint have been made for gunshot injuries, of which 68 were certainly fatal, and 3 are undetermined. Up to the period of our late war there was not an authenticated example of recovery. In 1861, Stromeyer, one of the most distinguished German surgeons, declared that "it was not yet proved

that amputation at the hip-joint was deserving of a place among the resources of military surgery," and Sedillot, of France, taught that primary amputation at the hip was always fatal. But on the 29th of May, 1863, Edward Shippen, Surgeon of Volunteers in the U. S. Army, amputated the thigh of James E. Kelly at the hip-joint, on account of a gunshot wound, within seven hours after the receipt of the injury, and the man still lives, and is in the enjoyment of perfect health. There were also two other examples in the Rebel army in which this amputation was made at the same period, and the patients survived several months, but their final histories could not be traced. The possibility of recovery after the operation having been determined, it is now believed that with the improved means of controlling hemorrhage which we possess, in the lately invented aortic compressor, we shall in future be successful in a large proportion of cases.

Resections.

But amputations have, with some reason, been classed among the opprobria of our profession, inasmuch as they propose to cure only by oblation of the diseased limb. They imply a confession that the disease or injury is beyond the resources of our art, and that life can only be preserved by dismemberment of the body. Modern surgery has, therefore, sought to interpose some less serious alternative; and this has been found, in many cases, in what is termed resection, or excision. For example, a joint, such as the elbow, the shoulder, or the hip, being incurably diseased or shattered, and it having become manifest that the general system can no longer endure the local disturbance without extreme danger to life, the surgeon first considers whether excision of the joint ends of the bones may not be substituted for amputation, since experience has shown that by this procedure the diseased or injured structures may be often quite as effectually removed as by an amputation, and with no greater risk to life, while a more or less useful limb is preserved. In some cases it has been found that the limb, although shortened, has retained all of its original strength and latitude of motion, and is quite as useful as it was originally. In other cases its usefulness is impaired by the operation, but there is only required some mechanical support to restore completely the powers of locomotion and prehension. Operations of excision are, however, not limited to the joints. We practice excision of such parts of the bones as demand removal in any portion of the shafts of long bones. Smaller bones are frequently excised entire; and in a few instances the practice is extended to the whole of the shaft of a long bone. But what will surprise you most in this connection is, that we find that with proper management, taking care to make the operation at a suitable time, and carefully preserving the periosteum which is the immediate investment of the bone, a large portion of the osseous structure, and in a few instances the entire bone, will be reproduced. This branch of our science, namely, Osteogenesis, has been especially studied within the last few years, and the practical results already attained are remarkable.

Anaplasty, or the repair and restoration of mutilated and lost parts, has been practiced for a long time. Tagliacozzi acquired, about the middle of the sixteenth century, great celebrity in the construction of noses from the skin of the arm. The Koomas of India, among whom the loss of the nose was inflicted as penalty for various crimes, constructed noses from the skin of the forehead, and this is the method now generally adopted by surgeons, but which, in the progress of time, has undergone many changes and improvements, so that if at this day we cannot always furnish to order a Grecian or a Roman nose,

after the most perfect models, we may at least insure to our patients a nose entitled to respect, and sometimes deserving of admiration.

In like manner surgeons of our day do not hesitate to attempt the foundation of an eyelid, or to supply the loss of any portion of the cheeks, and in other cases to relieve disfigurements of the face or neck caused by burns and other accidents. A great number of these operations have been made by our surgeons since the close of the war to remedy those terrible deformities caused by gunshot wounds.

Healing of Ulcers by Transplantation.

Before leaving the subject of plastic surgery I must call your attention to a truly wonderful discovery which has just been made by a young surgeon, M. Reverdin, interne at the Hospital La Charité, in Paris. There are certain ulcers and wounds of integument which, solely on account of their extent, have hitherto been considered incurable. To illustrate by an example: If the whole of the skin were stripped from the arm, no effort of nature or skill of surgery, however long continued, could ever succeed in restoring the tegumentary covering. At least such has been the statement until to-day; and for the following reasons: First, because new skin never forms except from the margins of the old; and second, new skin can never be projected from the old beyond a few inches—perhaps two or three at most. But many examples are presented in surgery, in which the integument is destroyed by burns or by machinery to such an extent that repair, limited by these invariable laws, utterly fails to complete the restoration; and great deformity from contraction, a perpetual ulcer, or amputation have been the only alternatives.

I must be permitted to mention my own humble contribution to the relief of this condition, made in the same direction as that of M. Reverdin, but which his more brilliant discovery has completely eclipsed. By a successful operation upon a patient at the Hospital of the Sisters of Charity in Buffalo, in 1854, I demonstrated that a comparatively small piece of skin, perhaps three inches square, taken from one leg and transplanted to an open ulcer upon the opposite leg, which was eight inches square, would, after becoming attached, grow, and increase in size by the projection of new skin from its margins, until the whole ulcer was closed in. This operation has been repeated many times by myself and others since the date of my first experiment, and with similar results. But listen now to what M. Reverdin has done. He has taken a piece of skin not larger than a lentil seed from the arm of a patient, and inserting it in the midst of the raw, granulating flesh of an ulcer, it has become the centre from which new skin has been formed, and has extended on all sides; and by making several of these minute insertions, the whole sore has become speedily cicatrized.

Assisted by my house surgeon, Dr. Williams, I have repeated these operations at the Charity Hospital already more than fifty times, the results of which experiments have been published in *The New York Medical Gazette*. My first patient refused to submit to the operation, fearing that the excision of the piece of skin would be painful; but having cut a small piece from my own arm, he permitted me to insert it into his open wound. This trivial operation, made in the presence of a large number of others suffering from chronic ulcers, gave them an assurance that it was almost painless and bloodless, and no further difficulty was experienced in prosecuting the experiments. We had but six successes from this large number of transplantations, but the principal causes of failure have been ascertained, and will be avoided hereafter.

What is most remarkable in this thing is that the minute piece thus implanted seems to fall off in a few days; but at the point where it rested, after the lapse of a week or two more, a small white spot is seen gradually coming into view like a cloud upon a clear sky. The original and parent structure disappears, but a cell or seed is found to have been deposited, capable of indefinite growth and development. The precise law which governs this curious process we do not pretend to have ascertained; but having discovered the fact, and availed ourselves of it in the cure of our unfortunate patients, we can afford to wait for the explanation.

Squint Eyes.

Only five years later, in 1839, Dieffenbach, another celebrated German surgeon, made a successful operation for what is known in popular language as "squint eye," by dividing one of the six small muscles which rotate the ball. The announcement of Stromeyer's operation only a few years before had been received with great enthusiasm in all parts of the world; but the operation of Dieffenbach for straightening crooked eyes appealed more directly to the popular sentiment; its results were more uniform and immediate, and were obtained alike in the old and young. Consequently it was hailed with still greater enthusiasm, and the applause has been more prolonged. Soon after its announcement, I had an opportunity of making the operation upon a young man, before a large class of medical students gathered in the operating room, and when, after a brief and almost bloodless operation, the lad stood up, with his eye restored to its natural position, the students made the old building ring with their stamping and clapping, and shouts of applause. To-day young medical students witness the operation, which they have already seen performed fifty times or more, in silence. Familiarity has bred contempt. But many a young man, and many a young woman, whose oblique and sinister look has in childhood subjected them to thoughtless jests, and, perhaps, in later years, has turned away the heart of a lover, has had reason to be grateful to the skillful operator, and to the great German surgeon who first devised this method of relief.

Dislocation of the Hip.

By a process somewhat similar to that by which confessions were extorted in the Spanish inquisition, surgeons were accustomed until recently to attempt the reduction of dislocations of the hip. The muscles which surround this joint are the largest and most powerful of all the muscles of the body; and when, by an unfortunate accident, the thigh bone was thrown from its socket, the patient was first bled so as to lessen the power and resistance of the muscles, and then pulleys were applied and extension made, until reduction was accomplished. In 1851, Dr. W. W. Reid, of Rochester, N. Y., published an account of a new, simple, and effective method in which the reduction was accomplished by the hands of the surgeon alone, or by "manipulation," as it is termed, in contradistinction to the old method in which force was employed. (It is true that this method had been occasionally practiced by surgeons before this date, but the principles which control the reduction had been unexplained, and it had passed into disuse, or had been wholly forgotten.) While the patient is lying upon his back, the thigh and leg are lifted and carried through various motions of flexion, adduction, rotation, and abduction, by which the head of the bone is disentangled from the muscles and the reduction effected without violence, without pain, and in many cases in a period of time not longer than I have occupied in this description. My first trial of this method, made upon a

powerful young man, whose thigh had been dislocated in a railroad accident, was undertaken with little or no expectation of success; and when, on completing the turns, as they had been carefully described by Dr. Reid, I found the limb reduced, I was amazed and confounded.

There are many other great and essential improvements, as well as entirely new and successful surgical operations, to which it would be impossible even to allude in the time allotted to a single lecture. Some of them, without explanation, would appear to you trivial, and others might challenge a doubt as to their propriety; but to the experienced surgeon they indicate substantial progress in the relief of human suffering. Thus, for example, the employment of adhesive plasters as a means of extension, first suggested by Dr. Josiah Crosby, of Hanover, N. H., has almost revolutionized the treatment of fractures of the thigh; and the porcelain probe, invented by Nélaton, has proved of inestimable service in the detection and removal of leaden balls lodged in the various parts of the body. Lister's method of treating wounds by carbolic acid and exclusion of air is to-day doing great service upon the battle-fields of France.

The spleen, the kidney, and the uterus have been extirpated safely; but these are operations for whose justification there must be found special and extraordinary reasons. Barton, of Philadelphia, some years ago, devised and practiced successfully a new operation for the formation of a false joint in ankylosis of the hip and knee; and to-day we are waiting with interest to determine the value of certain ingenious experiments with the silver ligature, made by Dr. Howard, of this city.

Anesthetics.

Before I close, ladies and gentlemen, I must not omit to remind you that it is now just 26 years since the discovery of a method by which surgical operations could be made without causing pain, an end which was attained only after many centuries of inquiry and experiment. We find evidence that this subject occupied the surgeons from the commencement of the Christian era. The Roman physicians, in the first century, speak of the use of the wine of madragore for the purpose of inducing sleep and insensibility, when the knife or actual cautery were to be employed; and Pliny observes that some persons are put to sleep by the smell of madragore. Shakespeare more than once alludes to the sleep and inebriation which it induces. Hemlock, hemp, opium, and alcohol have been suggested, and at one time or another employed with unequalled but rarely satisfactory results. Mesmerism and magnetism have had their pretended successes. Pressure and cold have been applied directly to the parts to be operated upon. Juvet recommended a ligature to be placed above the point where an amputation was to be made. Moore preferred pressure made more directly upon the nervous trunks supplying the deceased member. Richerand advised dipping the cutting instrument into hot water. Others, with the same purpose, have immersed the knife in sweet oil.

Weary of these fruitless experiments, surgeons had at length settled into the conviction that a sharp knife, with a light and dexterous hand, or, according to the old maxim, to cut, "*tuto cito, et jucunde*," were the only means we could ever hope to possess for alleviating the pains of an operation. In the edition of "Velpeau's Surgery," translated by Townsend, of this city, and ready for the press in December, 1844, occur the following passages: "To avoid pain in operations is a chimera that we can no longer pursue in our time. A cutting instrument and pain, in op-

erative surgery, are two words which are never presented separately to the mind of the patient, but in an association which he must of necessity admit." * * * "It is to the hand of the operator and the quality of the bistoury that we must look to obtain the desired result. Let the hand be light and steady, and the bistoury smooth and well sharpened, and give with the first stroke the whole length and depth that the incision should have, if you can do so without danger; then act with promptitude and without hesitation, * * * and you will have no other pains to encounter than those which are inherent in the operation, and which nothing can separate from it." These words, my auditors, were the best legacy of comfort the most accomplished surgeon of the world could give to us, to avoid the pain of an operation, in December, 1844. The same month in which these words were uttered, Dr. Horace Wells, a dentist, of Hartford, Conn., made his first successful trials with nitrous oxide, and demonstrated that to avoid pain in surgical operations had ceased to be a chimera. There is, as I regard it, another singular coincidence connected with this discovery. The nervous aura which establishes an intercommunication of intelligence and sensation between the various members of the body, has been supposed to be identical with electricity. Anæsthetics, in their power of causing temporary insensibility, indicate perhaps a control over the nervous electrical currents. In May, 1844, five months before the discovery of the anæsthetic properties of nitrous oxide, the first message was carried over the telegraphic wire constructed by Morse, from Washington to Baltimore, in these words, very appropriately chosen by Miss Ellsworth, of Hartford, Conn., "What hath God wrought!"

Electric cords had been laid which were ultimately to bind all the nations of the earth in one united system, establishing a universal and coincident sympathy throughout the human family. In the same year the electric cords of the individual man were in like manner brought into subjection; so that hereafter sensation, intelligence, and all communication between portions of the body could be interrupted or established at pleasure. The electric currents of the body and of the world were henceforth, by Divine permission, under the dominion of man. From the same humble New England town a voice has answered to voice, as if in choral anthem, "What hath God wrought!"

"From harmony to harmony
Through all the compass of the notes it ran,
The diapason closing full in man."

The discovery of the anæsthetic properties of nitrous oxide was followed in 1846 by the discovery of a similar property in sulphuric ether, by Drs. Jackson and Morton, of Boston. In 1847, Dr. Simpson, of Edinburgh, discovered that chloroform was a much more powerful anæsthetic than either nitrous oxide or ether, but experience has shown that it is far less safe.—*Daily Tribune*, Jan. 7, 1871.

Amputation and Resection in Military Surgery.—Prof. V. J. Nussbaum, of Munich, writes the following from the battle-fields of France, with regard to this question: We have always made resection in gunshot fractures of the joints, whenever the main artery was intact, and the pulse could be felt at the extreme peripheral end. It was not always easy to feel the arterial pulsation in cases of wounded shoulder and elbow joints, as the patients had but a small, suppressed pulse, in consequence of anaemia, hunger, frost, and fear. Especially did this happen in many fractures of the knee joints, where pulsation was perceived but feebly, after several efforts were made in vain. Resection, if thoroughly practiced, can be made in five minutes as easily as amputation,

and I believe that amputation in gun-shot wounds of the knee is, in military surgery, only preferred for resection, because it can be made more conveniently, while the after treatment is also easier. But I consider it inhuman to take off the foot merely on account of its greater convenience. Surely amputation cannot be called less dangerous than resection, for, in the former, large arteries and nerves are cut, which, in the latter operation, remain intact. In amputating, a large portion of the body is cut away, interfering, with nutrition, innervation, and circulation, and affecting seriously the action of the vital organs. All this is done away with in resection. Bones are removed in amputation as well as in resection; gangrene, pyæmia, osteomyelitis may occur in consequence of either operation. During the Franco-Austrian war in Italy, eighty-two amputations of the thigh were made, all of which died. I am convinced that less would have died in eighty-two resections of the knee-joint. Every surgeon who saw my cases of resection thought that they compared very favorably with a similar number of amputations. The general health was decidedly better in resections than in amputations; indeed the patients of the latter class looked quite reduced. In addition to this, the former may expect to retain a useful foot, while the latter must resort to an artificial and very inconvenient limb. Still, in spite of the bad results obtained after amputations of the upper portion of the thigh, I must respect the surgeon who performs this operation soon after the injury is received. They complied strictly with the laws of our science, and thus saved the life of many a brave man. But those surgeons of every nation, who neither amputate nor resect, but rather trust to the conservative treatment, will bury a large number of wounded men, the lives of whom they might have saved. The grave covers their mistakes, but their consciences will uncover them, charging them with ignorance and want of energy, for the experience made in conservative surgery in fractures of the knee-joint is so sad, that an expectant treatment must be considered criminal.

I had but few chances of making resection of the shoulder joint, while this operation was frequently made in wounds of the elbow and knee-joint, which I performed twenty-one times, after the battles of Remilly and Bozeilles. Sometimes gangrenous infiltration may follow resection, and necessitate an early amputation, in order to save life, just as a primary amputation requires a second operation, on account of gangrene; many resections of the knee, however, especially those leaving the patella intact, and requiring but one lateral, longitudinal incision, healed repeatedly without great suppuration, so that every observer could not but admire the slight degree of fever and the healthy granulation.

I am convinced that this deviation from the usual rules of surgery preserved to many not only their foot and arm, but also life itself.—*Translated from the German.*

Process for Preparing Liq. Ferri Tersulphatis and Liq. Ferri Subsulphatis U. S. P., without the Formation of Noxious Gases.

By J. CREVELL, OF BROOKLYN, N. Y.

The best method for preparing the persulphates of iron perfectly pure, is undoubtedly to run a stream of chlorine gas through a solution of the protosulphate previously acidulated with the proper quantity of sulphuric acid. But this is obviously impracticable to most Pharmacæutists. The Pharmacopæia of the United States prescribes to oxidize the protosulphate of iron by means of nitric acid, a certain proportion of sulphuric acid being added. This is more practicable, and yields a good product, but is liable still to

several objections. Expensive vessels are required for boiling a mixture of sulphuric and nitric acids; a good draught is also necessary for the escape of the nitrous fumes, and very often during the operation the vessels are broken, or the operator is annoyed by the poisonous gases escaping into the room. For these reasons, many Pharmacæutists prefer to buy the article ready made; they have to pay a high price for it, and to depend on the manufacturer for its strength and purity.

I propose this new method, by which any Pharmæutist may prepare his own Liq. Ferri Tersulphatis or his Liq. Ferri Subsulphatis on his very prescription desk, if need be, and with the usual implements found in all drug stores.

℞ Sulphate iron in coarse powder, twelve troy ounces.

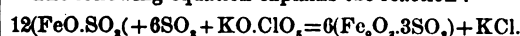
Sulphuric acid, two troy ounces and sixty grains.

Chlorate of potassa, three hundred and forty-eight grains.

Boiling water, twelve fluid ounces.

Dissolve the sulphate of iron in the boiling water in a glass matras, or any convenient bottle. Add the sulphuric acid gradually, and, while the liquid is hot, add the chlorate of potassa by small portions. When all is dissolved, filter and complete twelve-four fluid ounces. The whole operation need not take more than fifteen minutes.

The following equation explains the reaction:



This process has the advantage of giving out no fumes or smell of any kind; the product is free from any acidity but what belongs to the salt itself.

It is true the persulphate of iron thus obtained contains a small quantity of chloride of potassium, but this does not interfere with any of the uses for which it is wanted by the pharmacist. I think that the nitric acid always present in the preparation of U. S. P. is much more objectionable. Besides, any one who has followed the U. S. P. process knows that it is always when one tries to get rid of the last traces of nitric acid that the porcelain or enamelled dishes are broken.

A slight modification of the formula will give the Liquor Ferri Subsulphatis U. S. P.:

℞ Sulphate of iron, coarse powder, twelve troy ounces.

Sulphuric acid, one troy ounce and thirty grains.

Chlorate potassa, three hundred and forty grains

Boiling water, ten fluid ounces.

Operate as above and evaporate to twelve fluid ounces. Filter.

A Burning Earth.—A curious industrial application of a hydro-carbon called ozokerit, found as a mineral product in Moldavia and Wallachia, has been made in England. A firm, noticing its brilliant light when burned, decided to experiment on it with the object of making candles. To all appearances this was a most unpromising idea. The ozokerit, in its natural state, is a dirty, brownish-black mass, and the public have been so luxuriously educated in the matter of illumination that nothing but a very handsome candle can compete with the lights of the present day. The success of the enterprise has, however, been perfect. By sundry processes of distillation and purification, a beautiful, white, hard, waxy substance is produced, handsomer than spermaceti, not so transparent as paraffine, but possessing a brilliant gloss, and melting at a temperature of 140° Fahr. This high melting point (paraffine being about 125° and stearine 130°) allows the employment of a larger wick, and this, combined with the naturally brilliant light of the ozokerit itself, makes the candles burn with a brightness exceeding that of any now in use.—*Med. and Surg. Reporter.*

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G. TRESKATIS, M. D., - - - Editor.

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We shall mail the present number of THE PHYSICIAN AND PHARMACEUTIST to a number of Physicians and Druggists who are not subscribers; these will do us a favor by showing the journal to their neighbors.

We would especially request druggists to be kind enough to present it to the notice of physicians in their immediate vicinity.

The edition of THE PHYSICIAN AND PHARMACEUTIST, which is regularly issued, is so large that it affords special advantages to publishers and dealers, in having a knowledge of their issues and apparatus brought to the notice of many physicians who may not be subscribers to the medical journals published in their own locality.

Editorial and Bibliography.

A New Specialty.

A fellow is traveling out West representing himself as a physician of the Aural Institute, 1291 Broadway, New York, who, having been overworked in New York, now seeks health and recreation among the Western farmers. In order to combine the *utile cum dulci*, he condescends to set the rustic ears in good order. He is especially skilful in removing the wax from the ears, in the successful performance of which dangerous operation he takes a great deal of pride. He also understands and undertakes another operation, viz., pulling the wool over his patient's eyes. Both operations combined enable him to charge and obtain as much as one hundred dollars for the removal of the aforesaid wax. It is hardly necessary to inform our Western readers that this fellow is a consummate swindler and rascal. There is not, and never was, an aural institute at the above-mentioned number.

The American Dispensatory. By John King, M.D. Eighth Edition.—This work is written after the same plan as the U. S. Dispensatory, in a scientific and rational manner. Part I. is devoted to the *Materia Medica*. The various plants are arranged alphabetically, and their botanical properties given. The natural and artificial classifications are mentioned, a brief history presented, together with a statement of the chemical relations and incompatibilities, as well

as their therapeutic value. Part II. is principally occupied with "American Eclectic Pharmacy." The appendix contains a list of "obsolescent or mineral poisonous agents," a list of the principal mineral waters, tables of weights and measures, a number of valuable and practicable prescriptions. The list of remedies is, of course, taken almost exclusively from the vegetable kingdom, the mineral receiving but little attention. Mercury, which is mainly treated of as a chologogue, is the bugbear of the Eclectic, and is naturally banished among the obsolescent remedies. We were, however, pleasantly disappointed in missing that child-like confidence in and enthusiastic employment of the vegetable extract with which we met in some works of the same school, the authors of which seemed to possess a specific for every disease, phthisis included. It occurs, however, occasionally. Thus one, Prof. J. M. Scudder, considers powders of ipecac and opium (vulgo, Dover's powder) a specific in cholera infantum; podophyllin, besides being useful in a variety of diseases, breaks up bilious and typhoid febrile diseases. Living in an age of doubt, we may be permitted to doubt the efficacy of the various specifics. We inform, however, cheerfully our readers of Prof. Scudder's discovery, hoping they will find the same, and wishing them the, probably, necessary amount of faith.

Answers to Correspondents.

E. M., Boscobel, Wis.—*Muriate of Cinchonine sold for Sulphate of Quinine.*—The sample of the sulphate of quinine you sent us is nothing but muriate of cinchonine. Many others besides you have been deceived by this elegant fraud. Forgive us for calling any fraud elegant, but we cannot help it, for this is really much above the average of vulgar deception, showing in its perpetrator a high degree of ingenuity if not of honesty. Muriate of cinchonine has a great deal of the outward appearance of sulph. quinine, presenting the same kind of crystals, having the same peculiar bitterness, giving solutions of a bluish tinge by reflected light, being entirely dissipated by heat, and having nearly the same medicinal properties, though in a lesser degree. The fraud, however, is readily discovered by the following tests: Muriate of cinchonine is much more soluble in water than sulphate of quinine; for that reason it tastes more bitter. If a solution of acetate baryta be added to the solution of muriate of cinchonine, no precipitate occurs; while in the same case, sulphate of quinine gives a copious white precipitate of sulphate baryta and acetate quinine. A solution of nitrate of silver gives, with muriate of cinchonine, the well-known precipitate of chloride of silver, soluble in ammonia, insoluble in nitric acid, while no precipitate is formed with sulphate of quinine. These are quite decisive, but to make assurance doubly sure, the suspected salt may be subjected to Liebig's test, which you will find fully described in Wood and Bache.

Isicle, O.—What is the reason that it is always during a thaw, that water-pipes burst?—This is quite a popular error, that water pipes burst during a thaw. On the contrary, the fact is, they break during frost, and begin to leak when the water thaws. This may be ascertained very easily. Water has the almost unique property of expanding when changing to the solid state. If it is, then, confined in lead pipes, the pipes must give way and expand, or crack somewhere; but no leak is noticed yet, for the good reason that water cannot flow when it is frozen. When the thaw comes on, then it does flow with a vengeance, through the crevice caused by the previous freezing.

L. D., Springfield, Ill.—*Syrup of phosphates of iron, quinia and strychnia.*—This preparation is liable to change, owing to the instability of the superphosphate of iron it contains. When recently made, the syrup is limpid and nearly colorless; but after a while, it sometimes becomes milky, or turns to a ker color; occasionally, also, it ferments, though this of rare occurrence. The syrup becomes milky when it is left in an open bottle, or when water is added to it. The small quantity of water adhering to a recently washed bottle, is sometimes sufficient to turn it; at times, also, it turns milky without any apparent reason. The cause of this change is not well known, but is supposed to be the splitting of the superphosphate of iron into a basic and an acid phosphate. The remedy to this is, to add a small quantity of ammonia to the syrup, and to filter again. The second change, deepening of the color, always happens when the preparation is kept some time, and progresses with a rapidity proportionate to the exposure to light. This change is believed to be caused by a partial reduction of the sesquioxide of iron by the sugar, under the influence of light. The syrup acquires also a more styptic taste, as it grows darker. The only remedy to this is to keep the syrup in a dark place. Neither of these changes, however, interferes with the efficiency of the preparation. As to the last change, fermentation, the common failing of all syrups, it should hardly ever happen to a syrup of phosphates of iron, quinia and strychnia well prepared. When it occurs, there is no remedy, and the preparation should be rejected.

F. S. Hazelton, Pa.—This correspondent writes that a speculator is going around in his neighborhood selling to families a secret for making a burning fluid warranted inexplosive, and to cost no more than 25 cents a gallon. This is the recipe:

- 3 quarts benzine.
- 1 oz. powd. alum.
- 1½ oz. alcohol.
- 1 gill strong vinegar.
- 2 oz. saleratus.
- 4 large onions, cut fine.
- 2 tablespoonfuls table salt.
- ½ oz. gum camphor.

Dissolve the alum in the alcohol (if you can—Ed.) and add the gum camphor; stir well. Add two quarts of the benzine; stir again. Add all the other ingredients, except the benzine; stir again as long as it foams. Add the balance of the benzine and let stand two hours in a cool place.

We have heard of such fraud, with some variations. Generally, instead of onions, the speculators recommend potatoes, cut fine, of course. The enterprising party you mention has adopted onions, we suppose, in order not to infringe on another's patent. Perhaps the next will recommend mustard, or pickled cucumbers. After all, the result is the same—raw benzine, which is as dangerous, as a burning fluid, as nitro-glycerine would be. No wonder that accidents from fluid lamps happen so often. Such speculators should not be allowed to remain very long outside of State Prison.

B., Galveston, Ga.—There is such a thing as soluble phosphate of iron; the formula is not published yet, but is promised soon.

T. R., Mobile, Ala.—It is true, hydrate of chloral does not keep long in a watery solution. It changes to the insoluble modification, which is rendered again soluble by ebullition. But such is not the case when hydrate of chloral is dissolved in a syrupy or alcoholic liquid. We have kept syrup and elixir of hydrate of chloral ten months without any appreciable alteration.

Medicine.

Treatment of Sciatica by Freezing.—Dr. L. S. Adams, of St. Helena, Cal., reports in the *Pacific Medical and Surgical Journal* two cases (in one himself the sufferer) of sciatica, successfully treated, after various other usual remedies—among them the subcutaneous use of morphia—had failed or only given temporary relief, by the application of a “freezing mixture, composed of pounded ice and fine salt, placed in a linen cloth, making a bulk about four inches in diameter” over the tenderest portion of the nerve, until the space it covered was frozen white to the depth of half or three-fourths of an inch. A cloth, saturated with cold water, frequently renewed, was the only further application required; as soon as the chilling effect of the cold was felt, the pain was relieved and very soon ceased entirely.—*Med. Archives*, December, 1870.

Rapid Cure of a Pleuritic Exudation by Abstaining from Water and Watery Aliments.—November 20, 1869, a man forty-three years of age came into Prof. Niemeyer's hospital, with a pleuritic exudation in the right side, of two weeks' standing. The effusion reached to the third intercostal space. No fever. The patient was compelled to abstain from drinks and fluid aliments for several days. Some bread and a little salty sausage were allowed. He ate the bread, but could scarcely taste the sausage; his tongue was so dry that swallowing was nearly impossible. Sometimes he took a small piece of apple, and was contented by putting the tongue to the window glass. November 23, the dullness was below the nipple. From the 24th, the patient drank half a pint of wine daily. November 27, the dullness over the liver normal. For two days, a rubbing sound in the pleural region. The patient went up stairs rapidly without much trouble. Eating and drinking allowed, but no appetite. The patient, having had only one stool during the whole time, took a purgative. The following day (28th) he was discharged, cured.—*Ind. Jour. of Med.*, October, 1870.

Treatment of Variola with Carbolic Acid.—M. Chausard states he has for some time advantageously employed carbolic acid in variola. He selected the worst cases, and administered it in all those he judged likely to prove fatal. In five such cases recovery occurred in four. He considers it possesses a special action on the secondary fever, and is superior to all remedies hitherto proposed in its power of arresting the febrile symptoms, whilst others only give the patient the capability of supporting it. In two cases the confluence was extreme, and seemed beyond the hope of recovery; yet the acid treatment proved successful. In the fatal case death occurred from pulmonary congestion, which had been present throughout. The dose given was 15 gr. for men, and about 12 gr. for women, in water, and continued for from eight to ten days. (*La Revue Médicale*, April 16, 1870.)—*The Practitioner*, July 1870.

Cure for Small Pox.—The *Journal of Applied Chemistry* claims for the *sarracenia purpurea* the virtues of a specific in the treatment of small-pox. However alarming and numerous the eruptions on the body of the patient, the action of this remedy is such that there is rarely the least scar to tell of the ravages of the fearful disease. No other medicine reaches the disease in the same effective manner. The principle of the plant, by its contact with the virus in the blood, renders that virus inert and inoffensive. This can be shown by the fact that if vaccine or varioloid matter be moistened with a decoction of *sarracenia*, it is at once deprived of all contagious properties.

It has long been known as the best remedy in cases of varioloid, having been successfully used by the

Indians, and afterward by our physicians. The fact that more than five hundred cases have recently been cured by it in Bourges, France, has attracted much attention to the root, and occasioned further researches into its properties. It is to Dr. Morris, of Halifax, that we owe most of our knowledge of this valuable plant. The *sarracenia purpurea* grows wild in the swamps of Nova Scotia, and at the proper season the root is gathered and preserved for use. Dr. Morris pronounces it to be a sovereign remedy in cases of small-pox, just as quinine is so effective in its cure of fevers, or as belladonna is a remedy in scarlatina. The Indians look upon the plant as a preventative, and often keep a decoction of it in camp, of which they occasionally partake for the sake of purifying the blood. Dr. Morris has confirmed the truth of this action, by prescribing it for persons who were exposed as nurses to the contagion of small-pox.—*Med. Archives*, October, 1870.

Diphtheritic Paralysis.—Dr. Leube reports a case (*Arch. f. Klin. Med.*), in which, in addition to the loss of motor power, there were lowering of the sensibility of the skin and complete loss of sensation in the mucous membrane of the larynx above the free border of the vocal cords; while coughing was excited as soon as a sound was passed below the glottis. The difference is explained by the lower part being supplied by the tracheal branch of the recurrent as well as by the superior laryngeal nerve. The patient was fed for ten days by means of an oesophageal tube, and treated with strychnine, injected subcutaneously, in doses of one-twelfth to one-fourth of a grain daily. The improvement was rapid in all the symptoms.—*Dub. Med. Press & Circular*.

M. Broca recently exhibited before the Imperial Society of Surgery in Paris, the heart of a man thirty-one years old, who, with intent to commit suicide, had stabbed himself in two places in the fifth intercostal space. Fifteen days after the injury, he died of pyæmia, having, in the interval, inflicted other injuries in the neck and temple with a fork. At the autopsy it was found that the heart and pericardium had received a penetrating wound. The pericardium was cicatrized. A false membrane bound the right edge of the heart to the parietal fold of the pericardium. On the inner surface of the left ventricle, near the apex, was a firm cicatricial depression. The case demonstrates that solutions of the continuity in the cardiac walls are susceptible of being really healed.—*Gazette Hebdomadaire*, Aug. 5, 1870. *Nashville Jour. of Med.*, November, 1870.

Dr. J. P. Whitmore recommends in asthma, especially the bronchial variety, the iodide of potass, in small doses. Suffering from this fearful malady himself, he takes 5 grs. at bedtime, thus insuring a good night's rest. He warns against large doses, and does not advise repeating the dose, unless the attack of asthma is also repeated, and ascribes the failure of the iodide in asthma to these latter mistakes.—*Bost. Med. and Surg. Jour.*, November 24, 1870.

Dr. O. H. Smith, of Brooklyn, recommends very large doses of calomel in the treatment of uræmic poisoning. Whenever the urine is loaded with albumen, every tissue of the body is poisoned by uric acid, the brain overwhelmed with uræmic intoxication, and general anasarca comes suddenly upon the patient. He reports two cases of uræmia and dropsy in the eighth and ninth month of pregnancy successfully treated by this method. In the first, 60 grs. of calomel were given at once; in the second, 20 grs., repeated after three hours, and followed by cathartic. In each case free evacuations took place, and the dropsy and convulsions disappeared. Dr. S. claims

to have been equally successful in dropsy, following scarlet fever, especially the mild form. Four children, suffering in this manner, were prescribed 10–20 grs. of calomel, to be repeated and followed by a cathartic. All recovered. Dr. S. thinks that the remedy must produce some change in the action of the kidney, when we find these organs secreting albumen, and leaving uric acid in the blood, and then we administer mercury, and find the kidneys take on their normal function and eliminate urea, leaving the albumen in the blood.—*Med. Record*, November 15, 1870.

Surgery.

A Fragment of Knife-blade Lodged in the Chest Twelve Years, and Finally Coughed Up.—Dr. J. F. Snyder, of Virginia, Cass county, Illinois, reports in the *Chicago Medical Examiner*, as “worthy of record as a curiosity of surgical pathology,” the case of a man, sixty years of age, stout and robust, who, after suffering for a couple of months from what was diagnosed as circumscribed pneumonia, during a hard paroxysm of coughing, expectorated with an ounce or two of pus, “the point of a knife-blade an inch or two in length, half an inch in width, and weighing half a drachm.”

The patient now remembered a circumstance he had entirely forgotten—that twelve years before this, in a street fight at Beardstown, in which himself and several others had been engaged, he had been “stabbed in the back, about the lower point of the shoulder blade,” but as the wound gave him no pain and soon healed, he had no suspicion that any part of the blade had remained embedded in his body. The true pathology of the case was now manifest, and the patient rapidly recovered his health.—*Med. Archives*, Octob., '70.

Dr. McCull Anderson quotes excellent results from the administration of the hyposulphite of soda in cases of “recurrent furunculi in which no local or special constitutional cause can be detected,” with the provision that, “Before giving the medicine we must make inquiry as to the state of the bowels, which are frequently constipated, and correct any derangement that may be present. It should be given largely diluted, as in the following prescription: Hyposulphite of soda, an ounce and a half; simple syrup, one ounce; cinnamon water to twelve ounces, a tablespoonful in a large wineglassful of water thrice daily, on an empty stomach.”—*Med. Gazette*, July 23 1870.

Enterotomy in Ileus.—The practice of making an artificial anus in cases of intestinal obstruction was first suggested by Maunory, in 1819; it has been alternately approved and denounced by numerous writers. The latest writer in its favor is Dr. Fränzel, of Berlin. The principal arguments against opening the abdomen in any given case are: First, the occurrence of numerous recoveries from intussusception, even when the most serious symptoms, such as fecal vomiting, have set in; and, secondly, the difficulty that is always experienced in diagnosing the probable site of the obstruction before opening the abdomen, and of discovering its actual site afterwards. Dr. Fränzel's proposition, however, consists in making an artificial anus above the obstruction, and he considers that the situation where this should be made can be ascertained by attention to the sounds elicited on percussion; for it is constantly found that the intestine above the point of obstruction is tympanitic, and yields a metallic sound on percussion, and that this sound, as the disease advances, gradually spreads farther and farther from the point of obstruction, whilst the parts below are dull. He therefore proposes to cut down upon the tympanitic region, which is certainly situated above the site of constriction or obstruction, and to establish an artificial anus. He adduces a number of cases which bear out his views.

—*Virchow's Archiv*, Heft ii., 1870.—*Practitioner*, July, '70.

Dr. William McCormac, Surgeon-in-Chief of the Anglo-American Ambulance Corps at Sedan, is one of the first to report the results of the gunshot wounds and operations of the present war. We need not stop to inquire how much of this ambulance system is "Anglo" and how much is "American"; nor is it necessary to give more than a passing glance at the current of egotism that pervades the whole communication (*Med. Times and Gazette*, Oct. 22, 1870, p. 486). Dr. McC., Dr. Sims, and the medical gentlemen associated with them, had treated 1,193 patients, of whom 460 are placed in the report under the head of injuries, and classified as follows:

	Cases.	Deaths.
Gunshot wounds of the head, face and neck..	38	10
" " without penetration, of trunk	29	4
Penetrating wounds of chest.....	31	10
" " abdomen.....	3	3
" " pelvis.....	9	4
" " joints.....	35	21
Wounds close to and around joints, but not penetrating.....	25	1
Gunshot wounds causing fractures of bones and limbs.....	91	35
Gunshot wounds of extremities, without fracture.....	136	9
Gunshot wounds of hand and foot.....	55	3
Sprains, burns, contusions, etc.....	18	1

The surgical operations were of great variety and interest, as will be seen by the following table:

	Cases.	Deaths.
Disarticulation of joints, including two hip-joint and three knee-joint amputations....	11	9
Amputations of limbs, including fourteen thighs, nineteen legs and two double amputations.....	77	30
Resections of joints, one knee, two shoulder, nine elbow, a double resection shoulder and elbow, and resections of long bones.....	15	7
Ligature of subclavian.....	2	2
" " common carotid.....	2	1
" " femoral.....	1	1
" " dorsalis pedis.....	1	0

(All for secondary hemorrhage.)

Dr. McCormac considers the death-rate small, as the cases were of remarkable gravity; and these good results he attributes mainly to open windows and plenty of carbohc acid. About thirty of the deaths were from pysemia, "which, however, were quite as common, if not more so, than in the small houses and chateaux, with only a few patients in each, as it was in our larger establishment."—*Med. Times*, Nov. 15, '70.

Removal of the Whole Larynx.—In cases of malignant new growths in the larynx; which are beyond the possibility of extirpation, the question as to the removal of the whole larynx may be raised. This has recently been done by Dr. V. Czerny, of Vienna, who has approached this question experimentally; and shows that in dogs the operation can be performed without great difficulty, and that the loss of the larynx is not necessarily fatal to them. Even if the epiglottis have been included in the removal, the dog can swallow his food. The respiration is carried on through a canula. Dr. Czerny further experimented on the possibility of artificially supplying a dog in this condition with the means of phonation, and succeeded in this by adding to the upper part of the canula a piece with metallic tongs. Every surgeon will agree with the conclusion of Dr. Czerny's interesting paper, that only the dreadful and hitherto hopeless state of patients with malignant laryngeal growths can justify proposal of such an operation.—*Brit. Med. Jour.*

Dr. V. Langenbeck reports (*Berl. Med. Wochenschr.*, 1869, No. 12), two cases of spontaneous aneurisms, in

which he employed successfully subcutaneous injections of a spirituous solution of ext. of Ergot; in the first case the swelling was situated on the right subclavian artery of an old man, appearing above the clavivula as large as a fist and causing especially intense pain along the brachial plexus. Two grm. were injected from January 6 till February 7, at an interval of three days, removing all the unpleasant symptoms and diminishing the swelling considerably. The patient is still under treatment. In the second case an aneurism of the radial artery, of the size of a walnut, having existed for 20 years, disappeared after a single injection.—*Centralblatt f. d. Med.*, *Wiss.*, No. 21. 1869.

Almost Complete Severance of the Body without a Break in the Skin. [*British Medical Journal*, August 20, 1870.]—R. A., aged nineteen, a telegraph clerk, was seen near Camden Road Station at 11:50 on the night of Saturday, June 26th. He was then sober, had over two pounds of money in his possession, and stated his intention of going to Euston Square by the 11:56 train. Although he was known to the officials, and there were very few passengers, no one saw him get in at Camden Road, or get out at Euston Square. The ticket-collector also said that he should have recognized him at once had he been in the train. The train, after discharging at Euston, was backed into a shed; and, as two shunters, who had performed this duty, were returning along the line which the train had just passed over, they found R. A. lying on his back just inside the station, straight across the outer rail, with his head between the rails and his hat tilted over his eyes. He was alive when found, but died in a few minutes. The body was at once brought to University College Hospital. It was clothed in a long jacket, waistcoat, and trousers of thick, coarse cloth, on which the marks of the carriage wheels were plainly visible. Only a few pence were found in his pockets. There was not the smallest wound on the body, and only a few abrasions of cuticle across the abdomen. After some hours, pretty extensive ecchymoses appeared. On opening the abdomen all the abdominal muscles were found completely cut through horizontally, retracted, and curled up, leaving a gap five or six inches wide. The back muscles were in the same condition. The right kidney was cut in half. The transverse colon and a large piece of the ilium were lying free in the abdomen; and the body of the third lumbar vertebra was crushed literally to powder; every thing was divided except the skin. The rest of the body was healthy.

The case excited a good deal of interest at the time, and remarks on its occurrence appeared in most of the daily papers. Some suggested suicide; but suicides generally put the head or neck on the line. The position of the body, laid out quite at right angles to the rail, with the hat on the face, favored this view; but no motive was made out. Many seemed to think he had been stunned, robbed, and thrown out; but the absence of any bruises, and the position of the body, almost negatived this view. His money was loose in his pocket, and probably fell out in the moving. Lastly, the driver declared that it was impossible that he could have been run over at all; for, besides the three carriages and break-van, his engine weighed over thirty tons, and must infallibly have cut him in half. So it did, except the skin, which was protected by three layers of thick cloth, etc. Neither driver nor guard felt any shock as the train passed over him. Altogether, the case presents several points of great medico-legal interest.—*N. Y. Journal*, Dec., 1870.

Simulation of Hip Joint Disease by Suppuration of the Bursa over the Trochanter Major.—Dr. Macnab gives the details of two cases of this disease, which present features of interest. In one, a strumous boy, aged

eleven, received a blow on the trochanter, which produced pain and swelling, the former disappearing, the latter remaining under treatment. Rest, blisters and iodine externally, and phosphate and iodide of iron with cod-liver oil internally, failed to effect any improvement; and the limb simulated in a marked degree the first stages of morbus coxae. There is, however, no pain on pressure, or on striking the knee or foot upwards. A splint was applied, and the case looked a doubtful one, originating in periostitic inflammation, and likely to end in caries or necrosis. Two months afterwards, however, the swelling over the hip suddenly became painful. Suppuration occurred; the abscess burst, and speedy recovery followed. In the second case, a married woman, aged twenty-two, without previous injury, became sensible of severe pain in the left hip over the trochanter major. The pain increased, and swelling occurred. Opinions were divided as to the nature of the case, some regarding it as one of deep-seated abscess, the result of periostitic disease in the neighborhood of the trochanter major and upper part of the femur, others holding it to be an undoubted instance of morbus coxae. She was treated with counter-irritation, chalybeates, and cod-liver oil. The hip joint fixed, but not painful on pressure; slightly flexed on pelvis over the trochanter major, and involving the upper third of the thigh, was a large, tense, acutely painful swelling, and great constitutional disturbance. After deliberation, Dr. Macnab opened the abscess, from which a pint and a half of healthy pus flowed, and recovery soon followed. [See *Lancet*, November 12, 1870.]—*Practitioner*, 1870.

Dr. L. Traneus proposes, in the *Medical Archives*, December, 1870, the following treatment for naevus anastomoticus, which he believes to be more effective and rapid than the one usually employed, by needles and injections: The naevus is covered with an ointment consisting of equal parts of tartar emetic and simple cerate. This is allowed to remain 3 or 4 days, when it involves the whole growth, which finally sloughs off, leaving a healthy granulating surface, which, treated with a simple ointment, heals kindly and leaves a smooth, firm, white cicatrix.

Whenever the naevus is in a position unsuitable for the employment of this ointment, the growth is touched at intervals with a stick of caustic potash, until it is covered with a brown eschar, which, after some days, is detached, leaving a soft, pale cicatrix.

Torsion of Arteries as a Hemostatic Method.—Mr. John D. Hill, after an historical introduction, gives his personal experience of torsion, which, with Mr. Bryant, he considers may be applied in two ways: 1. By free torsion; 2. By limited torsion. Free torsion: In this method Thierry recommends that the artery should be neither fixed nor drawn out, but simply grasped with a pair of broad forceps, and twisted, without breaking off the end of the vessel; ten rounds in the case of large, six in medium-sized, and four in small arteries being usually sufficient. Fricke says the artery should, without violence, be drawn out about two-thirds of an inch, but not fixed, lest the twist may extend to the attached part of the vessel. The artery thus held should be detached from the surrounding tissues by a second pair of forceps. Twisting is then to be continued until the end of the artery is torn off, eight or nine revolutions being generally necessary. Limited torsion: In this process Amussat advises that the artery should be drawn out five or six times by means of a pair of forceps with a closing bolt. The vessel is then to be separated from its connections with a second pair of forceps, and held at its fixed point by the latter, while the end is twisted off by the former. Mr. Hill formerly adopted this plan, but from its failing on one occasion,

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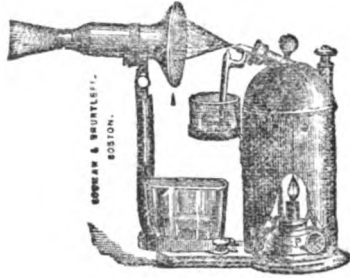


FIG. 15.

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modified it as follows: The artery is first seized with a pair of broad-pointed lock-forceps [one blade being placed within and the other without the vessel], and gently held without tension; with a second pair of forceps it is then separated from its connections, and fixed just below its point of attachment. The vessel is now twisted till it is felt to break, which generally occurs after the fourth, fifth, or sixth revolution. In young children sometimes seven revolutions are required. Mr. Hill has practised torsion of arteries in upwards of seventy surgical operations, without one instance of hæmorrhage, secondary or recurrent. The process of healing was for the most part satisfactory, in some cases complete primary union having occurred, and he thinks it adapted to every kind of operation, whether great or small. As compared with ligature, its application is more simple and rapid, and should failure occur, as sometimes happens with atheromatous arteries, it does so on the operating table. [See *Lancet*, Nov. 5.]—*Practitioner*, December, 1870.

A New Method of Effectually Remedying the Defect of Hare-Lip.—Dr. William Stokes, Jun., Surgeon to the Richmond Surgical Hospital [*Dublin Quarterly Journal*], presents, with plates, an ingenious operation for remedying the congenital malformation called hare-lip, which prevents the formation of a notch; also gets rid of the chance of that defect subsequently occurring. By his operation he gets rid of all the defects of other procedures, in which, in part or entirely, the principle of the utilization of parings has been adopted. For—

First. No subsequent curtailment of the projection at the lower extremity of the cleft is necessary.

Second. The procedure is applicable to all forms and varieties of hare-lip.

Third. There is no chance of portions of the soft tissues perishing from any twisting of them.

Fourth. There can be no subsequent puckering.

Fifth. There can be no subsequent notch, as previously mentioned.

Sixth. The possibility of any vertical sulcus or groove in the line of the cicatrix is also prevented, which is the case after Sedillot's, Malgaigne's, Samuel Smith's, and other operations.

[The reader is referred to the author's extended remarks upon the operation, accompanied with cuts, which are so interesting and connected that we should do injustice to Dr. Stokes by making extracts.]

As regards the time which is best for the performance of operations for remedying this defect, surgeons are much divided in opinion; some eminent operators maintaining that, where it is possible, all such operations should be performed before dentition, while others hold that better results are obtained in all cases where the procedure has been deferred until a later period. His experience leads him to adopt the views of the latter class, and his reasons are as follows:—

First. That the structures at the period of life previous to dentition are so weak, soft, and pulpy, are ill able to bear the continuous pressure of the needles and sutures, and that consequently they are specially liable to the occurrence of ulceration and the subsequent formation of transverse cicatrices. *Second.* The hæmorrhage which, even though it be extremely slight in amount, is, in very young subjects, fraught with some danger. *Third.* There is much difficulty in executing any of the plans that have been devised for the avoidance of the defects which sometimes subsequently occur. In support of his opinion, he has the high authority of his colleague, Mr. Adams, and the late Dr. Samuel Maclean, who went so far as to assert that, if possible, in all case operation should be deferred until after second dentition.—*Medical Record*, Nov. 15, 1870.

Obstetrics.

DISEASES OF WOMEN AND CHILDREN.

Extra-Uterine Pregnancy—Spontaneous Delivery by the Rectum—Recovery of the Mother.—Dr. Peck [*Medical and Surgical Reporter*] reported to the Iowa Medical Society, Davenport, Iowa, the case of a lady, who, while upon the "chamber," was delivered spontaneously, per rectum, of a dead and somewhat putrid fœtus, "judging from its development and size of about four months, and perhaps more." The cord, about six inches of which protruded, could be traced up the rectum for about five inches, and upon traction, broke beyond the reach of the finger, without bringing away any portion of the placenta, small pieces of which were subsequently found in the alvine dejections. "The uterus was not enlarged and the 'os' was normal and healthy. The vagina was intact throughout, and there was no blood nor fluid of any description in the vagina or womb." Upon the introduction of a "duck bill" speculum into the anus, about a half pint of blood, fluid and clotted, and considerable foetid gas escaped, with marked relief to the patient. Extreme prostration followed, with marked tympanites and general tenderness over the entire abdomen, but particularly in the region of the right ovary; but with appropriate treatment the patient made a slow but satisfactory recovery. The doctor thinks "that the records of obstetrics contain no precedent."—*Med. Archives*, Dec., '70.

Spontaneous Amputation in Utero.—Dr. George Pepper, of Philadelphia [*Am. Journ. of Obstetrics*], related at a meeting of the Philadelphia Obstetrical Society, a case of spontaneous amputation of the right arm in utero. The child was a well-developed female in other respects, weighed 9½ pounds, and seemed strong and well. The arm had been removed at about three-fourths of an inch below the elbow; the stump was rounded and well covered, and presented two small depressed cicatrices. The bones could be distinctly traced, and were nicely rounded off. No trace of the hand and arm could be found, though very carefully and thoroughly searched for. The umbilical cord was of normal length and appearance, and there were no fibrous bands or shreds attached to the amnion.

Dr. J. F. Wilson had seen a case about nine months since, where the right arm was removed at the junction of the upper and lower two-thirds. No trace of the limb could be detected.

Dr. Robert P. Harris had seen several cases where the limb was not developed, and in all cases there had been rudimentary fingers or toes.—*Med. Record*, Nov. 15, '70.

Rapid Dilatation of the Female Urethra in cases of Stone.—Dr. Alan P. Smith records, in the *Baltimore Medical Journal* [July, 1870], three cases in which he was successful in removing calculi by rapid dilatation of the urethra, which procedure, he claims, is a safe and easy method for accomplishing the object. The operation is performed as follows: A pair of dressing forceps, with narrow round blades, are inserted into the urethra, which is then to be gradually dilated by the separation of the blades, until the orifice of the canal will receive the extremity of the index finger. This is afterwards to be used as a dilating power. In the first case, a girl, aged seven years, the finger passed freely into the bladder, in less than five minutes. When the stone is too large to be passed entire, it should be broken and the fragments extracted, as was done in this case, and in six weeks the patient had entirely recovered. In his second case, aged 23, and third case, aged 22, the patients recovered in two months and four days respectively.

In all of these cases the hemorrhage was slight.—*Nashville Journ. of Med.*, Jan., '71.

Trismus Nascentium.—Dr. W. B. Fletcher reports, in the *Indiana Journal of Medicine*, two cases of this formidable and generally fatal disease, cured by putting the child to bed and keeping it there, "spasms or no spasms," with all tight clothing loosed, and giving half-grain doses of bromide of potassium after each convulsion. In the one case the disease came on thirty-six hours after birth, and in the other in twenty-four, and in both cases without any discoverable cause. In the former the child took forty grains of the bromide, as above stated, and the other, twenty grains before recovery was effected. Both children subsequently did well.—*Med. Archives*, Oct., '70.

Intra-uterine Medication, its Uses, Limitations, and Methods.—Dr. Peaslee remarks that applications to the canal of the cervix uteri are universally accepted by gynecologists at the present day as indispensable in uterine therapeutics. To facilitate description, he proposes the use of the term endometrium to indicate the lining membrane of the uterine cavity. He describes the various instruments, syringes, &c., that should be employed, and observes it should be known that pure water is not the least irritating of fluids, as seems to be generally supposed, in its action either on serous or mucous membranes. A weak solution of common salt, twenty to sixty grains to a pint of water, is much less irritating than pure water when applied to the eye, nasal passages, uterine cavity, or even to the peritoneum. When used, the injection should be at blood heat, and should be introduced very slowly, carefully, and without force. The quantity injected should not exceed ten to fifteen drops in a virgin, and from twenty-five to forty in the case of a woman who has been a mother. The return of any overplus of water injected should be secured by previous dilatation of the cervical canal by sponge tents, or laminaria, or steel bougies. The uterine affections not consequent on recent parturition, in the treatment of which these applications are especially appropriate, are metrorrhœa (or uterine catarrh) and metrorrhagia, though, when these are dependent on displacement or tumors, the primary cause should be removed. The principal fluids he recommends to be employed are weak solutions of sulphate of zinc, alum, tannic acid, and sulphate of copper; the tannate of glycerine, iodine and glycerine, very weak chromic acid, and, when the endometrium is very irritable, a solution of chlorate of potash may also be employed. In cases of metrorrhagia, persulphate of iron, or the perchloride, bears the palm.—[*New York Medical Journal*, No. 5, 1870.]—*Practitioner*, Sept., '70.

Complete Absence of the Uterus.—Mr. A. Dumas reports (*Montpellier Med.*, October, 1869) a case in which the diagnosis could not be confirmed by autopsy; and as we know how often, even in the dissecting-room, simple cases of bifid uterus with atrophied neck have been taken for a total absence of the organ, it is well, in the case related, to be reserved as to the diagnosis.

The patient, twenty-three years old, had never menstruated, nor had any supplementary hæmorrhages. She had suffered from no lumbar or abdominal periodic pains. She has an instinctive repugnance for marriage, and has never experienced the least sexual desire, nor been attracted by men's company. There is complete absence of the breasts, in the place of which is seen a minute nipple, surrounded by a pale and narrow areola. Her general appearance as to contour, delicacy of integument, expression, voice, walk, etc., is thoroughly feminine.

On examination of the genital organs, the *mons veneris* was found almost entirely devoid of hair; labia majora thin and compressed; the hymen was perforated; vagina narrow; and the meatus urinarius normally situated; the clitoris is provided with its hood, and is of normal size. At the *cul-de-sac* of the vagina there is a slight, imperforated prominence, conoid in shape, of pale color, and of the size of a small pea. The finger, introduced into the rectum, comes readily into contact with a catheter, which had been passed into the bladder. On inserting a cylinder or plug the full length of the vagina, the hand easily brings the end of the catheter in contact with the extremity of this vaginal cylinder. The finger in the rectum can also be readily placed upon the same point, thus proving that the uterus is entirely wanting.

The author is inclined to believe, also, in the absence of the ovaries and other annexæ, on account of the negative signs furnished by the rectal touch and hypogastric palpation, and from the entire absence of the menstrual molimen. However, he is less positive on this point than upon the absence of the uterus.—*N. Y. Med. Journ.*, Dec., '70.

Dr. G. Braun employs injections of iodine in ovarian cysts, under the following conditions: 1. Where the patient presents still a good appearance. 2. Where the cyst is not too large, of equal resistance, unilocular, thin, roundish, and the contents serous, yellowish-gray, or somewhat brownish-red. Dr. B. claims to have thus cured, radically, six cases.—*Wiener Med. Presse*, 18-33, 1869.

Scientific Notes.

A Test for Paper.—A weak solution of sulphate of aniline is now used for detecting the presence of wood fiber in paper. One drop of the liquid on a pointed glass rod applied to paper containing such fiber, even in minute quantities, if prepared in a mechanical way, will produce an intense yellow color. This reaction does not take place when the wood fiber has been chemically prepared.

Spontaneous Combustion of Black Silk.—Dr. Dingler records in *The Polytechnic Journal* a case of fire occurring in a silk store of Paris, the origin of which was traced to a package of black-dyed silk which had been brought from the dye-house within the previous 24 hours. This is not the first instance of the spontaneous combustion of black-dyed silk, the cause of which Persoz and others have failed to fully explain. Dr. Dingler advises mercers to keep such silk in small parcels, and to prevent its getting too hot by proper ventilation.

The Venom of Scorpions.—Dr. Jousset gives in the *Comptes Rendus*, a detailed account of his experiments on the venom of the *Scorpio ocellatus*, frequently found in Southern Europe. He concludes that this venom acts solely on the red globules of the blood, by depriving them of the property of gliding over each other; thus they become an adhesive mass which obstructs the circulation of the blood in the capillary portion of the vascular system. In the particular of a definite quantity being required to produce chemical action, this venom differs widely from virus which acts as ferment.

Gingilie.—This oil is obtained from an African plant (*Sesamum Indicum*), which is now extensively raised in Ceylon. If this oil be the same as that called sesame oil it differs widely in chemical composition from olive oil, to adulterate which it is sometimes employed. Gingilie is prepared from the seed, which yields from 40 to 44 per cent of a pale straw-colored oil. Being devoid of smell it may be used

for extracting the perfume of flowers, such as the jasmine, tuberose, camomile, and yellow rose. For this purpose one weight of flowers is added to three weights of oil in a bottle which is corked and exposed to direct sunlight for forty days, when the oil will become impregnated with the perfume.

Evaporation from Foliage.—Von Pettenkofer has experimented with an oak tree during one season to ascertain the amount of evaporation from its foliage. The number of leaves on the tree was estimated at 751,592. The rate of evaporation was found to increase from May to July, and the total amount of the evaporation was found to be eight and a half times more than that of the rain-fall. The excess must be drawn up by the roots from a great depth, and thus trees prevent the gradual drying of a climate by restoring to the air the moisture which would otherwise be carried off by drainage. This experiment clearly shows how climatic changes have been produced by planting trees.

Air and Ocean Currents.—Mr. J. Knox Laughton, in a recent contribution to theoretical meteorology, entitled "Physical Geography in its Relation to the Prevailing Winds and Currents," concludes that wind, acting not only on the surface of the sea, but, by means of intense friction, to a considerable depth, is the chief cause of the numerous ocean currents. His theory is that the whole atmosphere, relatively to the surface of the earth, continually moves, or tends to move from west to east; and that the prevalent local variations from that direction are either eddies, or deflections, formed in accordance with the principles which regulate the motion of fluids. It is hardly necessary to add that Mr. Laughton's conclusions are not accepted as correct by many prominent scientific investigators.

Recipe for Making Beef Tea and Soup for Invalids.—Make the cook understand that the virtue of beef tea is to contain all the contents and flavors of lean beef in a dilute form, and its vices are to be sticky and strong, and to set in too hard a jelly when cold. When she understands this, let her take half a pound of fresh-killed beef for every pint of tea she wants, and carefully remove all fat, sinew, vein and bone. Let it be cut up into pieces under an inch square, and set to soak for twelve hours in one-third of the water required to be made into tea. Then let it be taken out and simmered for three hours in the remaining two-thirds of water, the quantity lost by evaporation being replaced from time to time. The boiling liquor is then to be poured on the cold liquor in which the meat was soaked. The solid meat is to be dried, pounded in a mortar, and minced so as to cut up all strings in it, and mixed with the liquid. When the beef tea is made daily, it is convenient to use one day's boiled meat for the next day's tea, as thus it has time to dry and is easiest pounded. Good soup is that which is most like this beef tea, and is a very digestible article; bad soup, that which least resembles it, and is to be avoided as poison.—*Chambers*.

Epsom Salt.—In reply to a query propounded by the American Pharmaceutical Association, in regard to the best method of disguising the bitter and disagreeable taste of Epsom Salt, Mr. Isaac W. Smith, of Philadelphia, suggests the following:

R.—Rad. glycyrrhizæ cont. (deprived of outer bark), $\frac{3}{4}$ iv. Aq. bullient, Oij. vel q. s.

Mix and allow to stand, with occasional stirring, until cold; then express through muslin, adding more water, if necessary, until the residue no longer tastes; then filter, and to the filtrate add magnesiæ sulphatus, $\frac{3}{4}$ iv; finally, evaporate to dryness over a water-bath. Each ounce of the compound represents about one ounce of the crystallized salt.

To administer Quinine.—A. J. Gardner, Grand Rapids, Wood Co., O., [*Cin. Lancet and Observer*], has recommended to the physicians in his section a syrup of liquorice as a vehicle for administering quinine, as follows: Fluid extract liquorice, $\frac{3}{4}$ vj; simple syrup, $\frac{3}{4}$ x.; to a dose of $2\frac{1}{4}$ grains of quinine, a teaspoonful of the syrup mixed. This effectually destroys the bitter taste of the medicine, and the physician knows exactly what amount of quinine he is giving, but with the advertised sweet quinine he does not.

What is the use of the Blister.—The immediate blow to the vitality of the skin, is sufficiently remote from the seat of lesion to do no great harm thereto; and at the same time, being artificial and in a healthy tissue, is quickly followed by an effort of re-growth, and that healthy effort is propagated to the neighboring disorganized part. Hence it is that blisters do no good till they begin to heal; but then I feel sure they are often useful. It is, however, to be remembered that they destroy a good deal of blood by withdrawing the serous component of it, and are therefore weakening.—*Chambers on Indigestion*.

Sea-sickness.—The primary cause of the vomiting produced in unaccustomed persons by the motion of a ship or a carriage, by swinging, walking and the like, I believe to be the relaxation of the œsophageal sphincter by the vibration. The body being at rest, or rotated on itself, and the œsophagus hanging somewhat loose in it, the jar is strongly felt, and the involuntary plexus supplying these muscular fibres is temporarily paralysed by it.

The earliest notice one has of this œsophageal palsy, is faintness or giddiness, which, in a healthy and normally sensitive person, always precedes sickness, whether arising from the poisoning of those nerves by an emetic, from blows on the stomach or head, or from swinging motions.

The relaxation of sphincters, is always followed by the expulsion of the contents of hollow organs. Directly the anus is opened, the abdominal muscles act in forcing out the feces. So, also, with the bladder. And immediately after the relaxation of the œsophageal fibres, the diaphragm and its colleagues energetically press upon and empty the stomach. Even after it is emptied, they continue to be spasmodically contracted, and the unhappy landsman lies retching and roaring, with nothing to throw up except a little bile, which the squeezing has forced backwards through the pylorus. This is the worst part of the ailment, just as cramp of a stump, or a limb lying loose, is more painful than when the muscles have some resistance to act upon.

Women are more reliable to sea-sickness than men. Exposure to cold makes sea-sickness worse, by lowering the vitality of the nervous tissues—partially numbing them, in fact.

There cannot be a doubt, that the most frequent cause of sea-sickness is mental—the association of ideas. On the other hand, the effects of strong excitement in bracing us up against sea-sickness is very remarkable, and associates its pathology closely with that of other functional paralyses. This is said to be observed in a striking manner in ship-wrecks, when fright renders every soul alert, though before there was any danger, they had been exclaiming, that they recked not what became of them. Of that I have no experience; but I remember once lying prostrate with nausea in a Peninsular steamer, when the captain, knowing I was a doctor, begged me to come and attend an engineer, who had got rolled into the machinery by the heavy swell. The business, and the encouragement of the frightened man, cured me.

Alcoholic and ethereal stimulants, such as the "soda and B." of Channel steamers, or chloroform, act as a slight anæsthetic, and produce comfort in

some persons for a short time, but the reaction afterwards is very bad.

Carbonic acid, as in champagne or bottled porter, is more effectually sedative. But in some they appear to cause the sickness by the association of ideas. — *Chambers on Indigestion.*

Captain C. F. Hall, the celebrated Arctic traveller, who, as is well known, received a grant from Congress at the last session of fifty thousand dollars for polar exploration, is now engaged in examining several screw propellers, with the view of selecting one for use in his forthcoming expedition. His choice seems likely to fall upon a vessel belonging to the Government, now at the Washington Navy-yard, one of great strength, and built expressly for an ice-boat on the Delaware, and apparently capable of adaptation for the purpose in view. The captain expects to start on his journey as early in the coming spring as the season will permit.

Dr. Petermann (the geographer), of Gotha, announces some interesting results of various recent polar expeditions. In a late article he gives us a short summary of the German expedition to East Greenland, consisting of the steamer *Germania* and tender *Hansa*, which reached the latitude of 75 deg. 31 min., the party penetrating to 77 deg. 1 min. on sledges. The most important geographical result seems to have been the discovery of a fiord extending deep into the interior of Greenland, and up which the *Germania* steamed for many miles. A snow-capped mountain, rivaling Mont Blanc in height, was also met with. The accessibility of East Greenland was considered to be perfectly well established by the discovery of *Henry Hudson* in 1607, and by visits made since then by *Serresby*, *Clacering*, and *Sabine* prior to that of the *Germania*.

Of the expedition under *Von Heuglin* and Count *Zeil* to Eastern Spitzbergen, which they explored from 77 deg. to 79 deg. of latitude, mostly in row-boats, the most important result was the discovery of an extended main land about thirty-six nautical miles eastward of Spitzbergen, and extending at least sixty miles from north to south, being marked by numerous sharp-pointed peaks. This, if continuous with *Gillis Land*, was believed to be at least equal in magnitude to Spitzbergen. This discovery is considered by Dr. Petermann to be one of the most important results of polar investigations for many years. Numerous important collections were made by *Von Heuglin*, including many fossil plants and rare birds. Additional facts might have been ascertained, but that Count *Zeil*, learning of the war in Europe, in the month of September, hastened to return to Stuttgart to rejoin his regiment in France.

Another expedition was that of the Royal Russian corvette *Warjaeg*, which was accompanied by *Von Middendorf*, and which made many interesting investigations in the Polar Sea, between Nova Zembla and Iceland. The interesting fact was ascertained that the Gulf Stream, as far as Nova Zembla, possessed the very unexpectedly high temperature of 54½ deg. Fahr.

Besides these more important explorations referred to by Dr. Petermann, he mentions that about sixty Norwegian vessels visited the eastern half of the Polar Sea in pursuit of whales, exploring the whole region to the westward, eastward, and northward of Nova Zembla and the Kara Sea. During the past year this sea was found perfectly navigable in the height of summer; and Captain *Johannessen*, who the year before had skirted its entire shores in a sail-boat of about thirty tons, during last summer passed completely around Nova Zembla, and discovered that it extends much farther to the north than is generally indicated on the maps, namely, to 77 deg. 31 min.

north latitude. He found there Norwegian glass bottles, from which, for the first time, the existence of the Gulf Stream on this distant coast was established, as the region has not been visited by any intelligent seamen since the time of the Dutchman *Barentz* in 1594. In view of the facts thus adduced, Dr. Petermann thinks, with justice, that the knowledge of the Polar region has been materially furthered during the past year, as extended strips of the coasts of East Greenland, East Spitzbergen, and of Eastern and Northern Nova Zembla have been visited, and remote parts of the sea, which have hitherto been considered as filled with eternal and solid ice, have been shown to be navigable. At the date of his communication no information had been received by Dr. Petermann from the Swedish expeditions to West Greenland and to Spitzbergen, their results, as well as those of various Norwegian explorations in the north, being awaited with much interest.

It is known to many of our readers that Congress, during the last session, made an appropriation of fifty thousand dollars, in addition to a preliminary one of fifteen thousand, for the purpose of having observations made of the weather, to be communicated by telegraph to the principal stations on the sea-coast and the lakes, with the view of furnishing indications of the approach of storms. The matter was placed in the charge of the War Department, and intrusted by the Secretary to the Signal Corps; and several months were occupied by General *Myer*, the head of the corps, in selecting and training observers, and in despatching them to their positions, as well as in organizing the general details of the service. About the 1st of November the machinery was put into practical working order; and since that time reports have been received three times a day, and furnished to such newspapers as desired them. We have every reason to believe that this series of observations is destined to be of signal benefit to the country, from its warning of impending storms.

An expedition, under the direction of Lieutenant *Wheeler*, of the United States Engineers, has recently left San Francisco for the purpose of exploring and surveying portions of Nevada and Northern Arizona, with the view of determining their topographical and geological features. One object of the exploration is to ascertain more particularly the character of the great canon of the Colorado. The expedition is accompanied by a good practical geologist and a naturalist, and will, no doubt, by means of the collections and surveys, add materially to our knowledge of the country.

The *Engineer* states that when the Russian-American telegraph is completed the following feat will be possible: A telegram from Alaska for New York, leaving Sitka, say at 6:40 on Monday morning, would be received at *Nicoleaf*, Siberia, at six minutes past one on Tuesday morning; at *St. Petersburg*, Russia, at three minutes past six on Monday evening; at London, twenty-two minutes past four on Monday afternoon; and at New York, at forty-six minutes past eleven on Monday forenoon. Thus, allowing twenty minutes for each re-transmission, a message may start on the morning of one day, to be received and transmitted the next day, again received and sent on the afternoon of the day it starts, and finally reaches its destination on the forenoon of the first day, the whole taking place in one hour's time.

Poisonous Hair Dyes.

We have repeatedly warned our readers against patent dressings for the hair—so-called "hair restorers." They all depend upon the chemical action of lead and sulphur, upon the surface of the hair, for

their coloring qualities. Lead, when taken into the system, is highly poisonous, giving rise to neuralgic affections and paralysis. When these nostrums are applied to the hair they come in contact with the scalp and are then absorbed and conveyed into the circulation, giving rise to the affections above mentioned. Below we give the report of Prof. C. F. Chandler, who was employed by the New York Board of Health to analyze the different "hair tonics" with which the market is flooded. It will be seen that of the sixteen preparations which he examined, fifteen contained lead in varying proportions:

GRAINS OF LEAD IN ONE FLUID OUNCE.

1. Clark's Distilled Restorative for the Hair.....	0.11
2. Chevalier's Life for the Hair.....	1.02
3. Circassian Hair Rejuvenator.....	2.71
4. Ayer's Hair Vigor.....	2.89
5. Prof. Wood's Hair Restorative.....	3.08
6. Dr. J. J. O'Brien's Hair Restorer of America.....	3.28
7. Gray's Celebrated Hair Restorative.....	3.39
8. Phalon's Vitalize.....	4.69
9. Ring's Vegetable Ambrosia.....	5.09
10. Mrs. S. A. Allen's World's Hair Restorer.....	5.57
11. L. Knittel's Indian Hair Tonic.....	6.29
12. Hall's Vegetable Sicilian Hair Renewer.....	7.13
13. Dr. Tibbet's Physiological Hair Regenerator.....	7.44
14. Martha Washington's Hair Restorative.....	9.80
15. Singer's Hair Restorative.....	16.39

We hope, after the above exhibit, our lady and bachelor friends will find it profitable to abandon the use of so-called "hair restorers."—*The Bistoury.*

Putrefaction, Fermentation, and Infection.—In a paper recently read before the Medical Society of London, Dr. Sansom maintained (*Lancet*): "1. That putrefaction and fermentation are each due to the influence of living, growing and multiplying material. (a) Fermentation is the result of vital acts of particles of vegetable protoplasm in an organic fluid of uniform composition, the particles assuming distinct morphological forms according to the nature of the fluid. (b) Putrefaction is due to like influences exerted upon organic matter of a more complex or a mixed kind. 2. The atmosphere contains minute spores, ova, and particles of protoplasm, which it wafts from place to place. These are, for the most part, perfectly harmless. 3. The diseases of infection are due to minute particles of living protoplasm, which are transmitted by physical intermedia, are capable of reproduction within the recipient organism, and are excreted in vastly increased numbers. 4. Infecting molecules present the complex reactions of living beings, and though they resist certain physical influences, they are destructible by others. Slight chemical or physical disturbances may destroy them. 5. Fermentation and infection are alike due to living molecules; but though it is possible that in some cases (cholera, typhoid) the molecules of fermentation in complex conditions can induce infection, it is far from proved that all the diseases of infection are due to the organisms of fermentation."

Dr. Richardson complimented Dr. Sansom on making as good a defense as was possible of his various points. The germ theorists were reducing the germ further and further as their microscopes improved, and what they would eventually descend to as a real germ no one could yet say.—*Dental Cosmos*, Jan. 21.

Borax is the best cockroach exterminator yet discovered. This troublesome insect has a peculiar aversion to it, and will never return where it has been scattered. As the salt is perfectly harmless to human beings, it is much to be preferred for this purpose to the poisonous substances commonly used.

Borax is also valuable for laundry use, instead of soda. Add a handful of it, powdered, to about ten gallons of boiling water, and you need use only half the ordinary allowance of soap. For laces, cambrics, etc., use an extra quantity of the powder. It will not injure the texture of the cloth in the least.

For cleansing the hair, nothing is better than a solution of borax-water. Wash afterwards with pure water, if it leaves the hair too stiff. Borax dissolved in water is also an excellent dentifrice, or tooth-wash.—*Boston Jour. Chemistry.*

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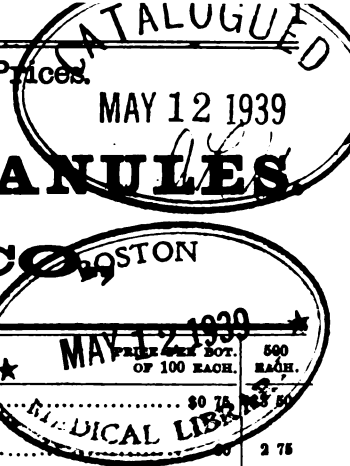
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Aloes et Assafet. U. S. P.	\$0 40	\$1 75
Aloes et Ferri. { Pulv. Aloes Socot. 1/2 gr. " Zingib. Jam. 1 gr. Ferri Sul. Exsic. 1 gr. Ext. Conil. 1/2 gr. }	40	1 75
Aloes et Myrrh.	50	2 25
Anti-billious (Veg.) { Pulv. Ext. Coloc. C. 2 1/2 gr. Podophyllin. 1 1/2 gr. }	70	3 25
Anti-Chill. { Chinoidin. 1 gr. Ferri Ferrocyam. 2 gr. Ol. Piper. Nig. 1 gr. Arsenic. 1-20 gr. }	1 25	6 00
Anthelmintic.	1 00	4 75
Antimony Comp.	40	1 75
Aperient. { Ext. Nux. Vom. 1/2 gr. " Hyocyan. 1/2 gr. " Coloc. C. 2 gr. }	85	4 00
Assafetida, 2 grs.	40	1 75
" Comp. { Assafetida. 2 grs. Ferri Sulph. Exsic. 1 gr. }	40	1 75
Bismuth. Subnit. 3 gr.	75	3 50
Bismuth et Ignatia.	1 50	7 25
Calomel.	40	1 75
" 5 grs.	50	2 25
" et Opil. { Calomel. 2 grs. Opium. 1 gr. }	85	4 00
Cathartic Comp.	70	3 25
Cathart. Vegetable. { Podophyllin Ext. Colocynth, Virgin Scammony, Aloes Soap & Cardamon }	75	3 25
Ceril Oxalat. 1 gr.	1 00	4 75
Cinchon Sulph. 1/2 gr.	75	3 50
Cook's 3 gr. { Pulv. Aloes Soc. 1 gr. " Rhei. 1 gr. Calomel. 1/2 gr. Sapon. Hispan. 1/2 gr. }	50	2 25
Colocynth, et Hydrarg. et Ipecac.	75	3 50
Copaiba, et Ext. Cubebæ. { Pil. Copaiba. 3 gr. Oleo res. Oub. 1 gr. }	80	3 75
Diuretic. { Sapo Hispan. Pulv. 2 grs. Sodas Carb. Exsic. 2 grs. Ol. Bacca Junip. 1 drop }	80	2 25
Emmenagogue. { Ergotine, 2 grs. Ext. Hellebore Nig. 1 gr. Socot. Aloes. 1 gr. Ferri Sulph. 1 gr. Ol. Sabina. 1/2 gr. }	1 40	6 75
Fel. Bovinum. { Ox-Gall, 2 grs. Pow'd Jamaica Ginger, 1 gr. }	50	2 25
Ferri (Quevenne's) 2 grs.	75	3 50
Ferri Carb. (Vallet's) U. S. P. 3 grs.	40	1 75
Ferri Comp. U. S. P.	40	1 75
Ferri Iodid. 1 gr.	65	3 00
Ferri Pyrophosph. 1 gr.	40	1 75
Ferri Valer. 1 gr.	1 00	4 75
Ferri et Quass. { Fer. per Hydrogen. 1 1/2 gr. Ext. Quassia. 1 gr. }	75	3 50
et Nux Vom. { " Nux Vom. 1/2 gr. Pulv. Saponis. 1/2 gr. }	75	3 50
Ferri et Quin. Cit. 2 grs.	75	3 50
Ferri et Strychnis { Strychnis 1-60 gr. Ferr. pr Hyd. (Quevenne's) 2 grs. }	1 40	6 75
Strychnis.	75	3 50

PILLS.	PRICE PER BOT. OF 100 EACH.	500 EACH.
Ferri et Strych. Cit. { Strych. Cit. 1-50 gr. Ferri. Cit. 1 gr. }	\$0 75	\$1 50
Gonorrhoea. { Pulv. Cubebæ. 2 grs. Bals Copalb. Solid. 1 gr. Ferri Sulph. Exsic. 1/2 gr. Terebinth. Venet. 1 1/2 grs. }	80	2 75
Hepatic. { Pil. Hydrarg. 3 grs. Ext. Coloc. Comp. 1 gr. Ext. Hyosciam. 1 gr. }	80	3 75
Hydrargyri. U. S. P. 8 grs.	40	1 75
Hydrargyri. Iod. et Opil. { Hydrarg. Iodid. 1 gr. (Richards.) Pulv. Opil. 1/2 gr. }	75	3 50
Iodoform et Ferri. { Ferrum per Hydro. 1 gr. Iodoform. 1 gr. }	3 25	
Ipecac et Opil. 3 1/2 gr. (Pulv. Doveri.) U. S. P.	50	2 25
Leptand. Comp. { Leptandrin. 1 gr. Irisin. 1/2 gr. Podophyllin. 1/2 gr. }	1 00	4 75
Opil. U. S. P. 1 gr.	80	3 75
Opil et Camphore. { Pulv. Opil. 1 gr. Camphore. 2 grs. }	90	4 25
Opil et Camph. et Tannin. { Camphore. 1 gr. Acid. Tannic. 2 grs. }	90	4 25
Opil et Plumbi. Acet. { Pulv. Opil. 1/2 gr. Plumb. Acet. 1 1/2 grs. }	80	3 75
Potass. Iodid. 2 grs.	85	4 00
Quinise Sulph. 1/2 gr.	85	4 00
" 1 gr.	1 40	6 75
" 2 grs.	2 75	13 50
" 3 grs.	4 00	19 75
Quinise. Comp. { Quin. Sulph. 1 gr. Ferr. pr Hyd. (Quevenne's) 1 gr. Acid. Arsenious. 1-60 gr. }	1 75	8 50
Quinise et { Quin. Sulph. 1 gr. Ferri. Ferr. pr Hyd. (Quevenne's) 1 gr. }	1 75	8 50
Quinise et Ferri { Quin. Sulph. 1 gr. et Strychnis. Ferri Carb. (Vallet's) 2 grs. Strych. Sulph. 1-60 gr. }	1 75	8 50
Quinise et Ferri et Valer. 2 grs.	3 50	17 25
Rhei. Comp. U. S. P.	75	3 50
Rheumatic. { Ext. Coloc. C. 1 1/2 grs. " Colchid. Acet. 1 gr. " Hyocyan. 1/2 gr. Hydg. Chlor. Mit. 1/2 gr. }	80	4 25
Stomachic. (Lady Webster's) { Pulv. Aloes Socot. 1 gr. Dinner Pills. 3 grs. Gum Mastich. 1 gr. Flor. Rose. 1 gr. }	80	2 25

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Digitalin. 1-60 gr.	75	3 50
Elaterium. (Clutterbuck's.) 1-10 gr.	95	4 50
Extract Cannabis Indica. 1/2 gr.	60	2 75
" Hyocyanus (English). 1/2 gr.	40	1 75
" Nux Vomica. 1/2 gr.	40	1 75
Leptandrin. 1/2 gr.	40	1 75
Mercur. Iodide. 1/2 gr.	40	1 75
Morphine Acet. 1/2 gr.	75	3 50
Morphine Sulphate. 1/2 gr.	75	3 50
Morphine Valerianate. 1/2 gr.	1 10	5 25
Podophyllin. 1/2 gr.	95	4 75
Quinine Valerianate. 1/2 gr.	40	1 75
Silver Nitrate. 1/2 gr.	2 00	9 75
Strychnia. 1-20, 1-40 and 1-60 gr.	75	3 50
	40	1 75

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Dr. G. Dujardin Beaumetz, of the Hospital de la Pitié, Paris, concludes after an elaborate study of the action of phosphorus in locomotor ataxia, that—1. Phosphorus appears to have a favorable influence in progressive locomotor ataxia. 2. Phosphorus acts as an excitant and as a tonic to the nervous system. It returns to the nervous tissue an indispensable element. 3. The administration of phosphorus should be commenced in small doses, one milligramme (about the 1-60 of a grain) and increased gradually. The administration should cease when digestive troubles supervene.—*Bulletin General de Therapeutique*, Jan 18th, Feb. 29th, March 18th, 1868.

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SUPPLEMENT.

In the *Comptes Rendus*, January 17, M. Robin criticises a work by M. Feltz. His remarks are translated in the *Bouddin Scientific Review*:

The work of M. Feltz treats of the leucocytes, or white globules of the blood, through the vascular walls. M. Feltz at the outset briefly recapitulates the theory of Cohnheim, which is itself based upon the anatomical and historical data furnished, chiefly, by Recklinghausen. Cohnheim does not doubt the passage of the white globules through the *stomata*, of which he assumes the existence in the vessel-walls in case of inflammation, etc.

M. Feltz combats the views of Cohnheim.

1st. He has studied experimentally the circulation in the mesentery and tongue of the frog, and on the mesentery of the mouse. He concludes that there is primarily a contraction of the vessels, followed by dilation due to temporary loss of the contractility of the vascular walls. Notwithstanding the numerous and minute observations, he has never been able (in opposition to Cohnheim) to discover any white globules entering the canaliculi, the existence of which has been admitted through the walls. He has only seen accumulations of leucocytes along their outer and inner walls; but it is impossible for him to affirm, as the result of direct observation, that the extra-vascular globules are an immediate blood-product.

2d. The author has then demonstrated, by different means [injections of colored substances into the blood and lymphatic systems, colorations of the arterial and venous tissues by nitrate of silver, microscopic preparations with photographer's paper, etc.] that the passage of the leucocytes is impossible, because the pretended epithelial *stomata*, and the canaliculi leading from them, do not exist; or at least are not shown through the agencies employed by Cohnheim and Recklinghausen.

3d. M. Feltz does not deny that there is around the vessels, in the inflamed tissues, a great number of elements similar to leucocytes; but not having seen them pass out of the vessels, nor formed within pre-existing elements, as the theory of Virchow would establish, he demands whether these elements be not formed *in situ* within exuded fluids. Without advancing a theory regarding their generation, he has entered upon a course of new experiments, which he will soon have the honor of submitting to the Academy.—*Philadelphia Reporter*.

Direct-Vision Spectroscopes.—The supposition is very prevalent that, for the purpose of viewing the phenomena exhibited by the spectroscope, a large and costly instrument is necessary, yet a small and cheap instrument may now be obtained which is capable of revealing all the peculiar and striking phenomena of spectrum analysis. A firm in New-Jersey are now making pocket spectroscopes equal if not superior to those of foreign manufacture. The instrument consists of a brass tube, upon one end of which is a carefully-made slit, the width of which may be increased or diminished by simply turning a milled ring upon the exterior; within this tube slides another, carrying an achromatic lens for "focusing" the slit; within this again slides another, carrying the compound prism, which comprises five distinct prisms, partly of crown and partly of flint glass, arranged so as to give direct vision. All its parts are carefully finished, and the instrument, in general appearance resembling a diminutive spy-glass, is inclosed in a cylindrical case so as to be carried in a vest pocket without injury. With this little instrument, costing only \$15, most of the absorption bands of the solar spectrum, the phenomena of absorption by gases and fluids, and the bright bands of the alkalies and alkaline earths are easily discernible.

On Carbonate of Baryta; a new Process for its Preparation.

By J. CREUSE.

Carbonate of Baryta is to the chemist and the pharmaceuist a precious reagent on account of its strong chemical affinities, its very precise combinations, and the facility with which it can be transformed into all the other Baryta compounds. Unfortunately, the use of the pure Carbonate of Baryta is limited by the high price it commands. This objection, indeed, has been made, not without reason, to the process for preparing sulpho-carbolic acid and its compounds, which I published in your previous number.

Carbonate of Baryta is quoted at \$1 25 per lb. by the manufacturing chemists. It is a high figure, considering that the natural carbonate, otherwise called *Witherite*, can be bought in quantities at 8 cts. a lb., already ground. This great difference in prices is caused by the imperfection of the only process published for refining the natural carbonate. This process, which consists in first transforming the mineral into sulphate of Baryta, then turning it into sulphuret by calcination with charcoal, is long, expensive and wasteful.

I propose another mode, whereby the formation of sulphate of Baryta being avoided, carbonate of Baryta may be obtained pure at one-sixth of the usual cost, if no less.

It is this: Take of *Witherite*, in lumps or in powder, any convenient quantity; add to it 4 or 5 times its weight of water, and dissolve it by muriatic acid gradually added, *secundum artem*. Stop the addition of the acid before the mineral is entirely dissolved, so as to have an excess of the Baryta rather than an excess of the acid. Allow to settle; decant, and to the clear liquid add cautiously a solution of oxalic acid, as long as precipitate is formed; a slight excess is not objectionable. 30 grains of oxalic acid are generally sufficient for each pound of *Witherite*, though the proportions vary according to the purity of the mineral. Allow the liquid to stand an hour; filter, and to the filtrate add a quantity of caustic soda, just sufficient to give it an alkaline reaction; bring to ebullition or let stand 5 to 6 hours; filter again and treat the liquid by a solution of carbonate of soda. Collect and wash the precipitate in the usual manner.

This process is founded on an observation I have made: that when a solution of oxalic acid is added to a liquid containing salts of Baryta and lime both, all the lime is precipitated first and immediately, while Baryta is affected only afterward, and not before some time.

The principal impurities met with in *Witherite* are; lime, always present; then iron, and occasionally copper or lead. The first and last are entirely removed in the shape of insoluble oxalates, while soda eliminates the other foreign bodies and forms only soluble salts, such as muriates or oxalates which disappear in the washings.

It may be objected that this process does not separate the strontia. To this I will answer: 1st. That strontia is very seldom found in *Witherite*; 2d. That the sulphuric process is not more reliable in this respect, as sulphate of strontia is almost as insoluble as sulphate of Baryta.

If, however, a chemically pure carbonate of Baryta is required, a slight modification of the process will produce it. It will be only necessary to use pure chemicals and to purify the chloride of baryum by repeated crystallizations before precipitating by carbonate of soda.

On the Production of Pure Bromide of Potassium.—

According to Adrian, the bromide of potassium obtained in commerce is seldom pure. Several samples examined by him contained on an average 10-15 per cent. of foreign materials; in one sample he found 35 per cent. of the latter. The foreign substances were principally sulphate of potassa (as high as 3.3 per cent.), chloride of potassium (as high as 30 per cent.), free alkalies or their carbonates (4 per cent.) iodide of potassium, and promate of potassa. It is impossible to obtain from such a product a perfectly pure article by a simple operation; hence, to produce pure bromide of potassium, the bromide used in its manufacture should be first purified. This may be done as follows: commercial bromide is shaken up with water and a little ether; the chloride of bromide being easily soluble in ether, goes into solution, and is decomposed by the action of the water into hydrochloric acid and bromine; a few successive washings serve to separate the chlorine completely, and by shaking the bromine now with dried starch-paste, the iodine is separated. By distilling the product thus obtained, we have bromine free from chlorine and iodine. If this is now dissolved in a solution of potash, free from hydrochloric and sulphuric acids, we obtain a mixture of bromine and potassium and bromate of potassa. The latter salt is converted by gentle ignition into bromide of potassium, which is dissolved in water and then crystallized. By this treatment a product is obtained pure enough for medicinal uses.

Bobierre and Herbelin have also been engaged in studying the purification of bromide of potassium. They recommend that the bromide of potassium be dissolved in a very small quantity of water, and bromine water added, a little at a time, and the solution then heated to boiling. After each addition of bromine water the solution may be tested with starch-paper for iodine, and the bromine added until the starch-paper is no longer acted upon. An excess of bromine should be avoided. In this way the iodine is set free by bromine. The solution free from iodine is evaporated to dryness and re-crystallized.—*Journal de Pharmacie et Chimie*.

Dr. McCall Anderson quotes excellent results from the administration of the hyposulphite of soda in cases of "recurrent furunculi in which no local or special constitutional cause can be detected," with the provision that, "Before giving the medicine we must make inquiry as to the state of the bowels, which are frequently constipated, and correct any derangement that may be present. It should be given largely diluted, as in the following prescription:—Hyposulphite of soda, an ounce and a half; simple syrup, one ounce; cinnamon water to twelve ounces, a tablespoonful in a large wine glassful of water thrice daily, on an empty stomach."—*Med. Gazette*, July 23, 1870.

Dr. Augustus C. Hamlin, of Bangor, Me., has been notified by the Surgeon-General, U. S. A., that in case of actual war in Europe, he will be appointed special commissioner to report upon the hospital and medical systems of the armies of France and Prussia.

✱ The "*Heathen Chinese*" is attracting some attention just now, and perhaps some of our readers may be interested in the following statement of the treatment of a case of surgery by a "Chinese" surgeon. The account is taken from the *Memoirs of Father Ripa*, founder of the Chinese College at Naples, who was in China as a Missionary for thirteen years, and for the greater part of that time attached to the Court of the Emperor Kang-hy, and may be found in the edition published by Wiley & Putnam in 1846, at page 78.

"The Emperor Kung-hy, to avoid the excessive

heat of the summer at Pekin, usually resided at his summer palace at Jehol, in Tartary, from the beginning of May till the end of September. I was commanded to follow him thither, together with Father Filisch, as mathematician; Father Rod, as surgeon; Father Sarenin and Don Pedrini, as interpreters. We all set out on horseback, but, before we were out of the city, my horse slipped and I was instantly thrown, receiving frightful wounds on my head and other parts of my body. As my companions did not dare to stop, they recommended me to the care of two heathens, and left me fainting in the street. When I recovered my senses, I found myself in a house, but everything appeared dark and indistinct, and I felt as if I had fallen from my horse two months before. The Emperor sent me a Tartar surgeon, for he and his Court were fully persuaded that, for falls, the Chinese surgeons were better than Europeans. And, to confess the truth, though the mode of treatment seemed to me to be of barbarous description, and some of the remedies appeared useless, I was cured in a very short time. This surgeon made me sit up in my bed, placing near me a large basin filled with water, in which he put a thick piece of ice, to reduce it to the freezing point. Then, stripping me to the waist, he made me stretch my neck over the basin, and, with a cup, he continued for a good while to pour the water on my neck. The pain caused by this operation upon those nerves which take their rise from the pia-mater was so great and unsufferable, that it seemed to me unequalled. The surgeon said that this would staunch the blood and restore me to my senses, which was actually the case, for in a short time my sight became clear, and my mind resumed its powers.

"He next bound my head with a band drawn tight by two men, who held the ends, while he struck the intermediate part vigorously with a piece of wood, which shook my head violently, and gave me dreadful pain. This, if I remember rightly, he said was to set the brain, which he supposed had been displaced. It is true, however, that after this second operation, my head felt more free.

"A third operation was now performed, during which he made me, still stripped to the waist, walk in the open air, supported by two persons, and, while thus walking, he unexpectedly threw a bowl of freezing cold water over my breast. As this caused me to draw my breath with great vehemence, and as my chest had been injured by the fall, it may easily be imagined what were my sufferings under this infliction. The surgeon informed me that if any rib had been dislocated, this sudden and hard breathing would restore it to its natural position.

"The next proceeding was not less painful and extravagant. The operator made me sit on the ground, and then, assisted by two men, he held a cloth upon my mouth and nose till I was nearly suffocated. 'This,' said the Chinese Esculapius, 'by causing a violent heaving of the chest, will force back any rib that may have been bent inwards.'

"The wound on the head not being deep, he healed by stuffing it with burnt cotton. He then ordered that I should continue to walk much, supported by two persons; that I should not sit long, nor be allowed to sleep before ten at night, at which time, and not before, I should take a little hifan—that is, thin rice soup.

"This continued walking caused me to faint several times; but this had been foreseen by the surgeon, who had warned me not to be alarmed. He assured me that these walks in the open air, while fasting, would prevent the blood from settling on the chest, where it might corrupt.

"These remedies seemed barbarous, but I am

bound in truth to confess that in a few days I was so completely restored, as to continue my journey into Tartary."

Latent Hydrophobia!—Rather a funny hydrophobia case has just been adjudicated in a Boston Court. The plaintiff testified that after he was bitten by the defendant's dog, not mad at the time, he suffered great anxiety of mind, because he thought that if at any future time the animal should go mad, all persons previously bitten by the dog would go mad also. But the presiding Judge made short work of these fanciful apprehensions, and ruled that no damages could be recovered for anxiety on account of such "superstitious notions." However, the lacerated plaintiff was consoled for his bites, and in spite of his bad pleading; for the jury gave damages to the amount of \$262.

Professor Winchell, of the University of Michigan, has recently promulgated a new theory respecting the origin of the vegetation of the American prairies, namely, that it dates back beyond the historical epoch to the glacial period. He believes the origin of the prairies to be lacustrine; but, contrary to the generally-received opinion, he maintains that lacustrine sediments contain no living germs. Diluvial deposits, he states, on the contrary, are found everywhere replete with living germs, which, when hidden away from the influence of light and moisture, retain their vitality or power of germination for an indefinite length of time. These living germs of the diluvial deposits he believes to have been buried during the glacial period, in the course of which the surface was plowed up by glaciers, and afterward exposed to the commotion of the sea, which overspread the land, burying everything in promiscuous ruin; but yet, by this very means, storing away the seeds which, when brought to the surface after the lapse of a geological age, are possessed of vitality, and able to reclothe the barren earth with verdure and beauty. Thus, in proportion as the diluvial surface became exposed, the flora of the pre-glacial epoch was reproduced. In support of this theory, he brings forward the argument that the fossil plants which have been discovered in the tertiary deposits show a correspondence of genera, and in some cases even of species, with those existing at the present time.

A Sign of Death.—To distinguish death from "trance," Dr. Laborde, in a communication to the French Academy of Medicine, points out a very simple test. He states that if a polished steel needle be inserted to a sufficient depth into the muscles of a person apparently but not really dead, and allowed to remain, it loses, in generally a short time, its polish, and becomes oxidized; while this oxidation does not occur when the needle is introduced into a dead body, even if the needle be allowed to remain as long as an hour. This absence of oxidation, with generally recognized concomitant phenomena, is, Dr. L. believes, a constant sign of real death.

Bayard Taylor on Quacks.—"I am not blood-thirsty, but I should feel little grief if the Indians were to pounce upon and carry off, beyond the reach of rescue, every agent of quackery who defaces the finest scenery of the road. Can not the two great railroad companies prevent this outrage? At the Sherman Summit, along Green River, in Echo and Weber cañons, in the Humboldt Palisades—wherever there are noble masses of rock—you find them painted with the unclean shibboleth of the quack. Heaven forbid that I should mention whose bitters, or lotion, or dentrifices, thus proclaim the vulgarity of its advertiser; but I have vowed never to use any such bitters, or lotion, or dentrifices, and I advise all overland travelers to do the same. The sight of this vile defacement—which no other country in the world would tolerate for a day—was the only disagreeable circumstance of my journey to and fro."

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Temperature, 50°; temperature of the air, 68°.

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Carbonic Acid Gas..... 24 cubic inches.
Nitrogen..... 2 " "
Oxygen..... 1 " "
Hydrosulphuric Acid..... Traces.

Solids Contents.

	gr.
Sulphate of Potash.....	0.180
" Soda.....	0.080
" Magnesia.....	2.350
" Lime.....	2.120
Chloride of Sodium.....	1.950
" Magnesium.....	0.560
Carbonate of Lithia.....	traces
" Strontia.....	0.040
" Lime.....	1.380
" Magnesia.....	1.030
" Manganese.....	0.130
" Iron.....	2.250
Phosphate of Lime.....	0.110
Alumina.....	0.120
Silica.....	0.020
Organic Matters.....	0.040

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Miscellaneous and Personal.

A Massachusetts man having lately undergone a very severe surgical operation, his mind became unsettled, and he was seized with the conviction that they had removed all the internal organs from his body and left him a mere anatomical shell. All their protestations to the contrary only convinced him the more of the perfidy of the whole medical profession. He steadily refused to eat or drink. After lingering for nearly a month, he died the other day in a Salem hospital, bewailing his stolen vitals, and execrating the thievish doctors.

High Homeopathic Potencies Explained.—It is well known that, in the preparation of homeopathic medicines, each measure of one dilution is made into a hundred measures of the next; that is to say, starting with one grain to make the first dilution, a grain of the first dilution contains 1-100ths of a grain of the original medicine; a grain of the second dilution contains 1-10,000ths of a grain; a grain of the third dilution 1-1,000,000th—and so on. These dilutions, or attenuations, are carried on as high as 100, 1,000, and even 3,000 repetitions. How the medicinal activity of a drug is enhanced or developed by this process, is the problem to be solved. A writer in the *New England Medical Gazette* (Homeopathic) gives this explanation: "In a dilution in which it is inconceivable that the salt, already so infinitely subdivided, should inhabit every drop of water in proportions recognizable as matter, it is quite likely that it resolves itself into a specific magnetism, by virtue of which it becomes (for want of a better term) spiritualized. This magnetism, electricity, or spirituality, becomes more and more developed as it recedes, with each successive attenuation, farther and farther from its original condition. . . . Thus only is it possible to comprehend the action of a homeopathic medicine: by assuming, first, that every article of the materia medica has a power—electricity, or whatever it may be called—latent within it, like fire in the flint [!]; and, secondly, that this power is developed of matter, though not matter itself, and intensified in an increased ratio as it is removed from its primitive condition as matter."—*Pacific Med. Theory*, Nov., '70.

John Wesley as a Doctor.—Not many perhaps of those to whom the name and fame of John Wesley are known, identify the great sectary with the work of which he was not a little proud, his "Primitive Physic, or an Easy and Natural Method of Curing Most Diseases," printed by William Pine, in Narrow Wine street, Bristol, and sold at the New Room in the Horse Fair, and in London, 1762. It was lately submitted for the edification of the pharmacutists at their Liverpool conference, among a century of old books, and Wesley's announcement "that every man of common sense (unless in some rare cases) may prescribe either to himself or his neighbor, and may be very secure from doing harm where he can do no good," was compared with his old recipes. Among the remedies which he approves as "tried"—a word which he thus made proverbial in the Methodist connection—is bleeding for consumption. The patient is to lose six ounces of blood every day for a fortnight, if he lives so long, and then every other day, then every third day, and every fifth day for the same time. The gout is to be cured by the application of raw, lean beef-steak; for twisting of the bowels, one, two, or three pounds of quicksilver in water. The pharmacutists came to the conclusion that Wesley was more successful as a theologian than a physician, and that his experience of the value of "untutored common sense" in his former capacity, had induced him to undervalue the necessity of a basis of skilled knowledge in the latter.

A Dentist in Philadelphia has traced out the career of 1,000 dentists, with this result: 163 died before they reached middle life, 643 attained fair success, 57 made fortunes, 27 died from intemperance and other vices; 96 failed entirely; and 3 committed suicide.

The cause of Chemistry in London has recently suffered from the loss by death of two of its most distinguished exponents. Dr. William Allen Miller, LL.D., F.R.S., Professor of Chemistry in King's College, died early in October, at the age of 52. He was a pupil of Liebig in his younger days, and, after being for several years assistant to Prof. Daniell, succeeded him in 1845 in the Professorship. His "Elements of Chemistry" passed through three editions. At the time of his death he was Vice-President of the Chemical Society, Treasurer and Vice-President of the Royal Society, Assayer to the Mint and Bank of England, etc.

Dr. Augustus Matthiessen, F.R.S., F.C.S., Lecturer on Chemistry at St. Bartholomew's Hospital, was found on the 6th of October, seated at a table in his laboratory, with a bottle of prussic acid and another of urate of ammonia near him, with which he had probably been experimenting. He seemed to be asleep, but had doubtless been dead several hours. He was only forty years of age, but, though young, had distinguished himself by numerous valuable researches on specific gravity, effect of temperature on electric conducting power, etc., for one series of which he received the Royal medal. He elaborated experiments leading to improvements in copper wire for telegraphic purposes, especially in submarine use. He was also successful in his inquiries in the more profound fields of organic chemistry. He proved, among other results, that when morphia and codeia are acted upon by hydrochloric acid, a new base, called by him apomorphia, is formed, which is a very decided emetic.

Section Cadaveris of Sir J. Y. Simpson.—A carefully conducted necropsy of the distinguished Professor revealed extensive deposits of fat about the heart, kidneys, and other organs, with an aneurismal dilatation as large as a pigeon's egg at the apex of the left ventricle. The arteries of the brain were enlarged and diseased, exhibiting extensive atheromatous deposits. The convulsions of the cerebrum were remarkable for the number, depth, and intricate nature of their foldings. "They were packed and twisted in such a manner that many were dwarfed, and failed to reach the surface."

Books, Pamphlets and Journals Received.

The American Dispensary. By John King, M. D., Prof., etc. 8th Edition. Cincinnati. Wilstock, Baldwin & Co. 1870.
The Pathology and Treatment of Venereal Diseases. By Freeman J. Burnstead, M. D., Prof., etc. 3d Edition, revised and enlarged, with illustrations. Philadelphia. Henry C. Lea. 1870.
Satan in Society. Written by an Anonymous.
N. Y. Medical Journal.
Medical Gazette.
Boston Medical and Surgical Journal.
Buffalo Medical and Surgical Journal.
Medical and Surgical Reporter.
Ind. Journal of Medicine.
Medical Bulletin.
Journal of the Gynecol. Society, Boston.
Dental Cosmos.
American Eclectic Review.
American Practitioner.
Nashville Journal of Medicine and Surgery.
New England Medical Gazette.
Chicago Medical Times.
Cincinnati Lancet and Observer.
The Practitioner.
Detroit Review of Medicine and Pharmacy.
American Journal of Pharmacy.
Cincinnati Medical Repository.



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Every intelligent physician knowing that the successful operation of the oil, in its liquid state, depended upon the secretions of the biliary, gastric and pancreatic organs, will at once appreciate the vast relief afforded to these organs, by the articles upon which they are required to act being submitted to that action, in the only form in which it can possibly prove efficient, viz: as a jellified or solidified emulgent. This condition being now so highly perfected by my new mode of preparing, more benefit is secured to the patient by a single teaspoonful of this jelly, than by double the quantity of the unjellified oil. Nor is this at all mysterious to the medical observer, since he knows that these organs are now invigorated, which before were overtaxed to reduce the medicine to the emulgent condition, before digestion, absorption and assimilation could be accomplished.

By these demonstrative facts none can fail to observe, that what before might (and frequently did) act as an irritating cathartic, is now rendered one of the most mild, bland and nutritious forms of aliment, in combination with one of the most efficient medicinal agents, capable not only of arresting tubercular development, but even of restoring the integrity of wasted lungs, by supplying for their reconstruction the very elements without which no structures can remain healthy.

Consumptive patients whose delicate stomachs would never tolerate the purest oil in its unjellified condition, have lived for years upon this preparation, which (as demonstrated in September, 1857, before the Academy Section of Materia Medica, New-York,) contains 8¢ per ct. of the purest oil. This fact at once elicited the approval of this body, which endorses the propriety of progress over routine, being perfectly satisfied that while all the objections against the crude oil were entirely obliterated, all the medicinal properties in this preparation were contained in the highest possible degree of purity.

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